

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF THE INSPECTOR GENERAL**

**CHILD AND FAMILY SERVICES AGENCY
CHILD PROTECTIVE SERVICES
ADMINISTRATION**

**REPORT OF INSPECTION
April 2011**



**CHARLES J. WILLOUGHBY
INSPECTOR GENERAL**

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Inspector General

Inspector General



April 20, 2011

Roque Gerald, Psy.D.
Director
Child and Family Services Agency
400 6th Street, S.W.
Washington, D.C. 20024

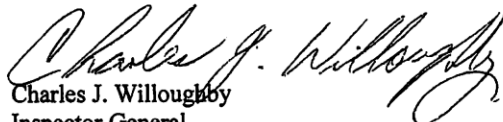
Dear Dr. Gerald:

Enclosed is our *Report of Inspection of the Child and Family Services Agency's Child Protective Services Administration* (OIG No. 11-I-0039RL). Written comments from the Child and Family Services Agency on the inspection team's 11 findings and 23 recommendations are included in the report. The D.C. Public Schools (DCPS) and Public Charter School Board (PCSB) reviewed a draft of the report's second key finding regarding school-based mandated reporters' understanding of their legal obligations and the legal obligations of CPS social workers during child abuse and neglect investigations. DCPS and PCSB provided comments to the OIG's recommendations. This report will soon be available publicly at <http://oig.dc.gov>; I encourage you to share it with your employees.

In addition, we have enclosed *Compliance Forms* on which to record and report to this Office any actions you take concerning each recommendation. These forms will assist you in tracking the completion of action(s) taken by your staff, and will assist this Office in its inspection follow-up activities. We track agency responses to all conditions cited and compliance with recommendations made in our reports of inspection. Please ensure that the *Compliance Forms* are returned to the OIG by the response date, and that reports of "Agency Action Taken" reflect actual completion, in whole or in part, of a recommended action rather than "planned" action.

We appreciate the cooperation shown by you and your employees during the inspection and look forward to your continued cooperation during the upcoming follow-up period. If you have questions or comments concerning this report or other matters related to the inspection, please contact me or Alvin Wright Jr., Assistant Inspector General for Inspections and Evaluations, at (202) 727-2540.

Sincerely,


Charles J. Willoughby
Inspector General

CJW/ldm

Enclosure

cc: See Distribution List

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Letter to Dr. Roque Gerald
April 20, 2011
Page 3 of 3

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Mission Statement

The Inspections and Evaluations (I&E) Division of the Office of the Inspector General is dedicated to providing District of Columbia (D.C.) government decision makers with objective, thorough, and timely evaluations and recommendations that will assist them in achieving efficiency, effectiveness and economy in operations and programs. I&E's goals are to help ensure compliance with applicable laws, regulations, and policies, identify accountability, recognize excellence, and promote continuous improvement in the delivery of services to D.C. residents and others who have a vested interest in the success of the city.

TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
INTRODUCTION.....	7
Background and Perspective	9
Scope and Methodology	9
Compliance and Follow-Up.....	10
<i>LaShawn</i>	10
Reduction-in-Force (RIF)	11
EMPLOYEE SURVEY	13
KEY FINDINGS	19
Overview of Intake and Investigation Processes	21
Thirty-Day Investigation Closure Requirement Not Achieved and May Compromise Investigation Quality.....	23
Some Mandated Reporters in D.C. Schools Do Not Understand Legal Obligations of Reporting.....	32
Occurrence and Documentation of Formal Supervision Inconsistent	39
ADDITIONAL FINDINGS	45
Referrals That Do Not Meet Criteria for Abuse and Neglect Accepted for Investigation	47
CPS-Specific Training Curriculum Not Implemented.....	52
Midnight Shift Needs Program Manager.....	56
Low Morale and Lack of Job Security Contribute to CPS Turnover	58
Average Caseload Reports Mask Caseloads That Exceed Maximums	61
Social Workers, SSAs Report Insufficient Case-related Supplies, Vehicles.....	64
Healthcare Safety Items Not Readily Available	64
Child Care Supplies Not Maintained Onsite.....	65
Vehicles Not Consistently Available for Timely Response to Clients	67
APPENDICES	71
Appendix 1: List of Findings and Recommendations	73
Appendix 2: Abuse and Neglect Priority Level Responses	77
Appendix 3: Flow Chart of Intake Process	79
Appendix 4: Summary of Center for the Study of Social Policy Assessment Reports	81

TABLE OF CONTENTS

ACRONYMS

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ACF	Administration for Children and Families
AFSCME	American Federation of State, County, and Municipal Employees
AIP	Amended Implementation Plan
APHSA	American Public Human Services Association
APSR	Annual Progress and Services Report
CFSA	Child and Family Services Agency
CFSR	Child and Family Services Review
CPS	Child Protective Services Administration
CSSP	Center for the Study of Social Policy
CWLA	Child Welfare League of America
CY	Calendar Year
D.C.	District of Columbia
D/CFSA	Director of the Child and Family Services Agency
DCHR	District of Columbia Department of Human Resources
DCMR	District of Columbia Municipal Regulations
DCPS	District of Columbia Public Schools
DHS	Department of Human Services
DPM	District Personnel Manual
EOM	Executive Office of the Mayor
FSW	Family Support Worker
FTE	Full-time Equivalent
FY	Fiscal Year
HFTC	Healthy Families/Thriving Communities
I&E	Inspections and Evaluations
I&R	Information and Referral
IP	Implementation Plan
MFO	Modified Final Order
MPD	Metropolitan Police Department
NASW	National Association of Social Workers
NRCCPS	National Resource Center for Child Protective Services
OIG	Office of the Inspector General

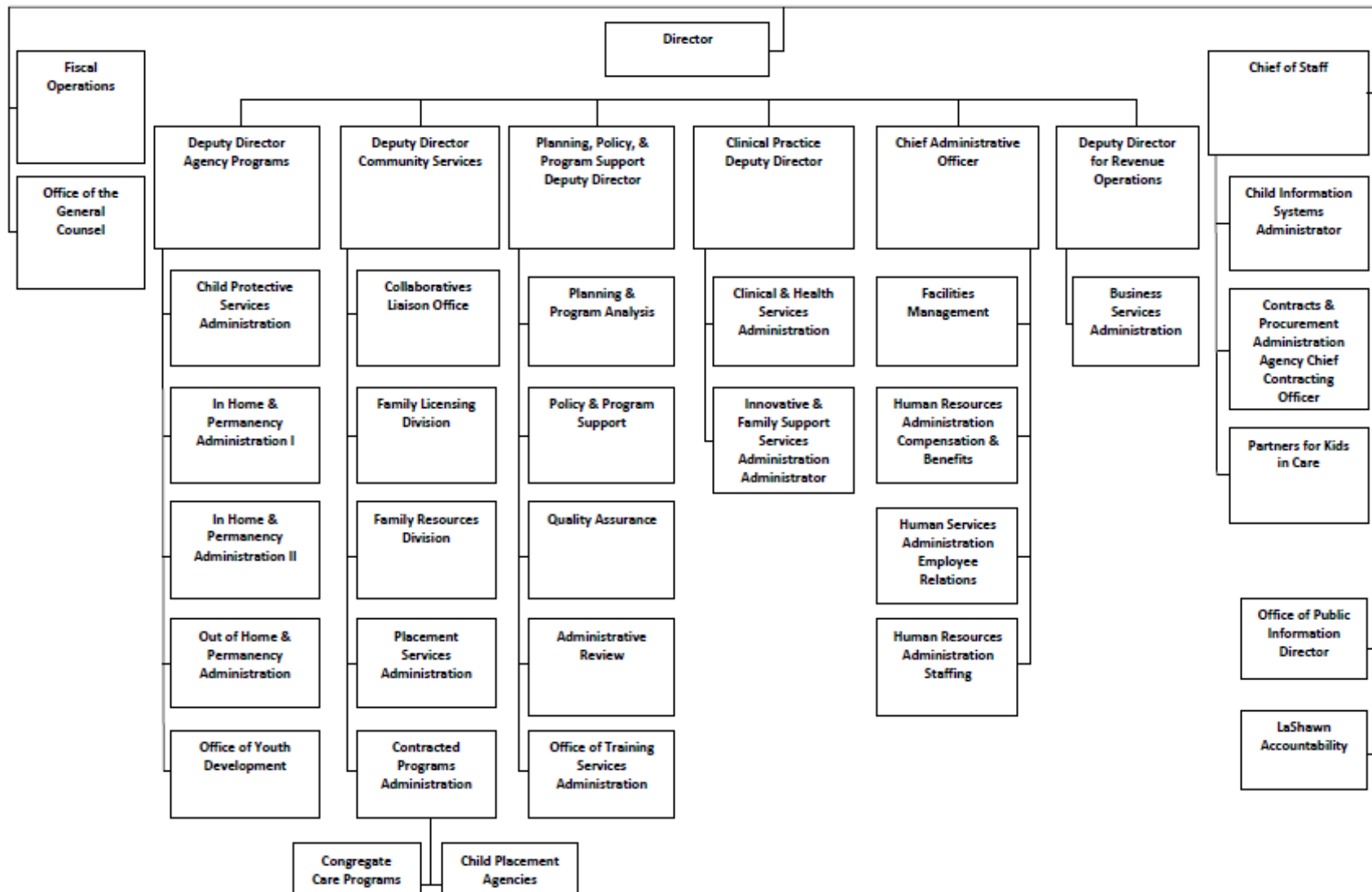
ACRONYMS

OPPPS	Office of Planning, Policy, and Program Support
OTS	Office of Training Services Administration
PCSB	Public Charter School Board
PKC	Partners for Kids in Care
RIF	Reduction-in-Force
ROI	Report of Inspection
SSA	Social Services Assistant
YID	Youth Investigations Division

ORGANIZATIONAL CHARTS

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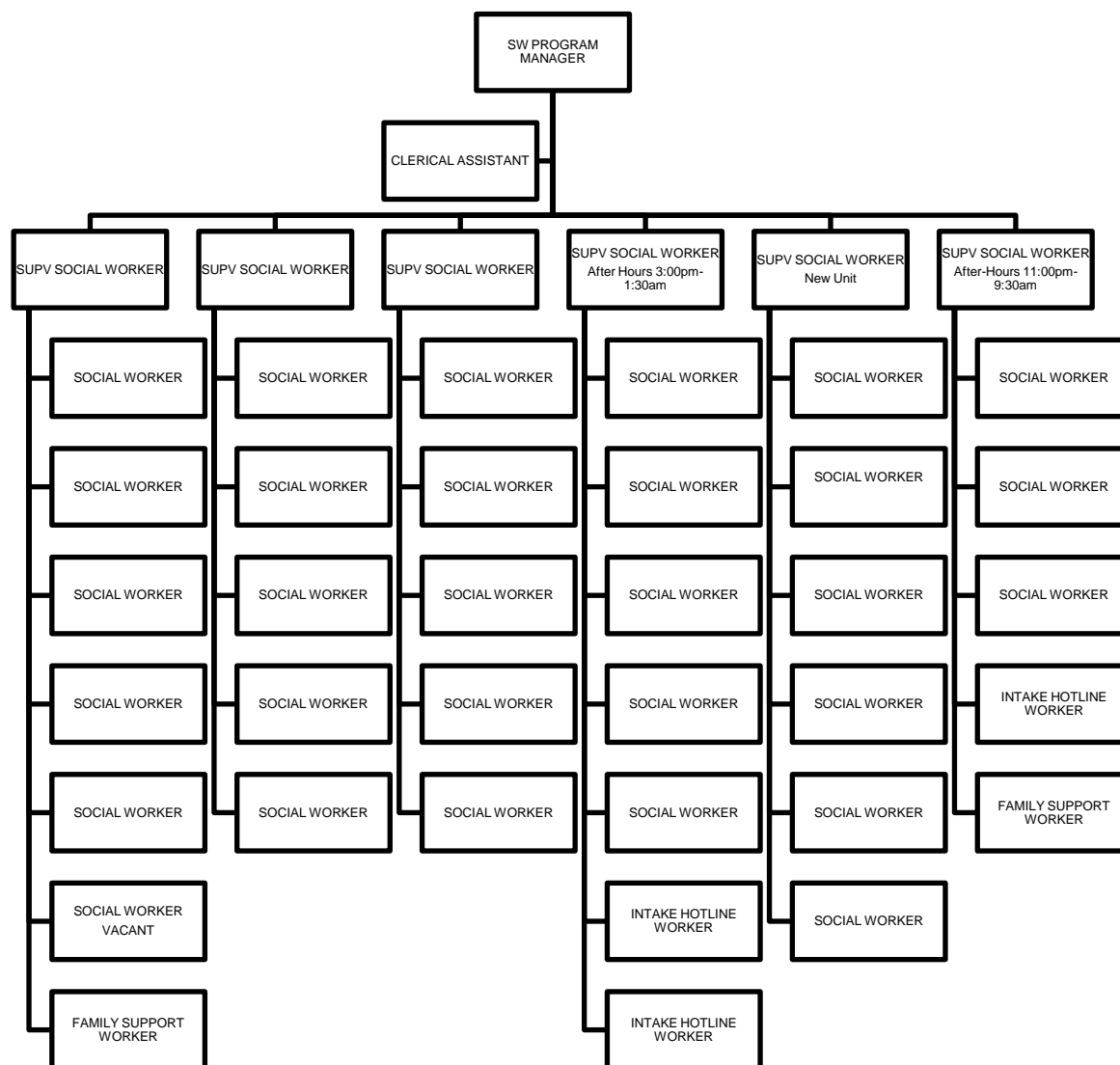


Organizational Structure for CFSA and CPS as of 2/15/11. Information provided by CFSA.

ORGANIZATIONAL CHARTS

ORGANIZATIONAL CHARTS

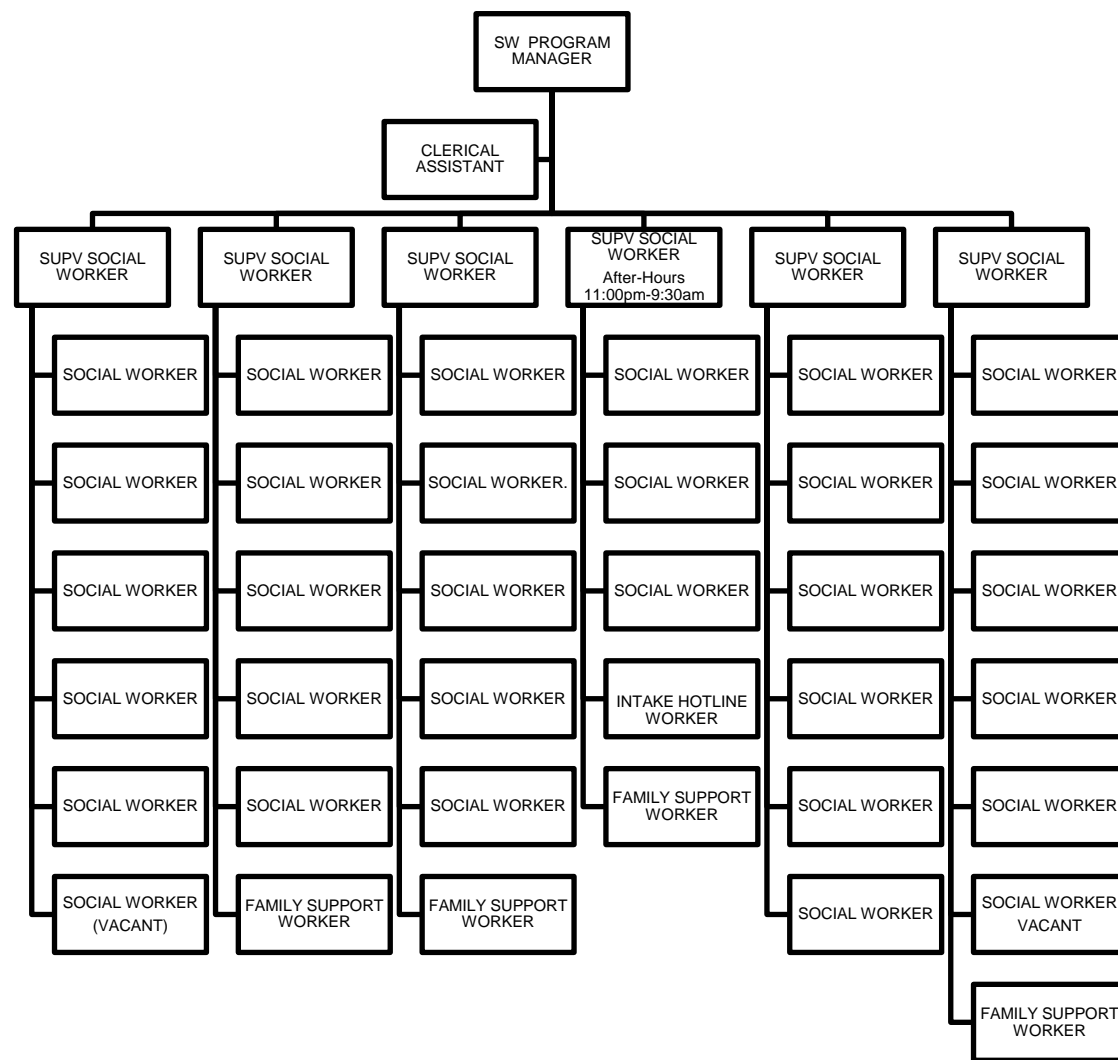
CPS Division I



ORGANIZATIONAL CHARTS

ORGANIZATIONAL CHARTS

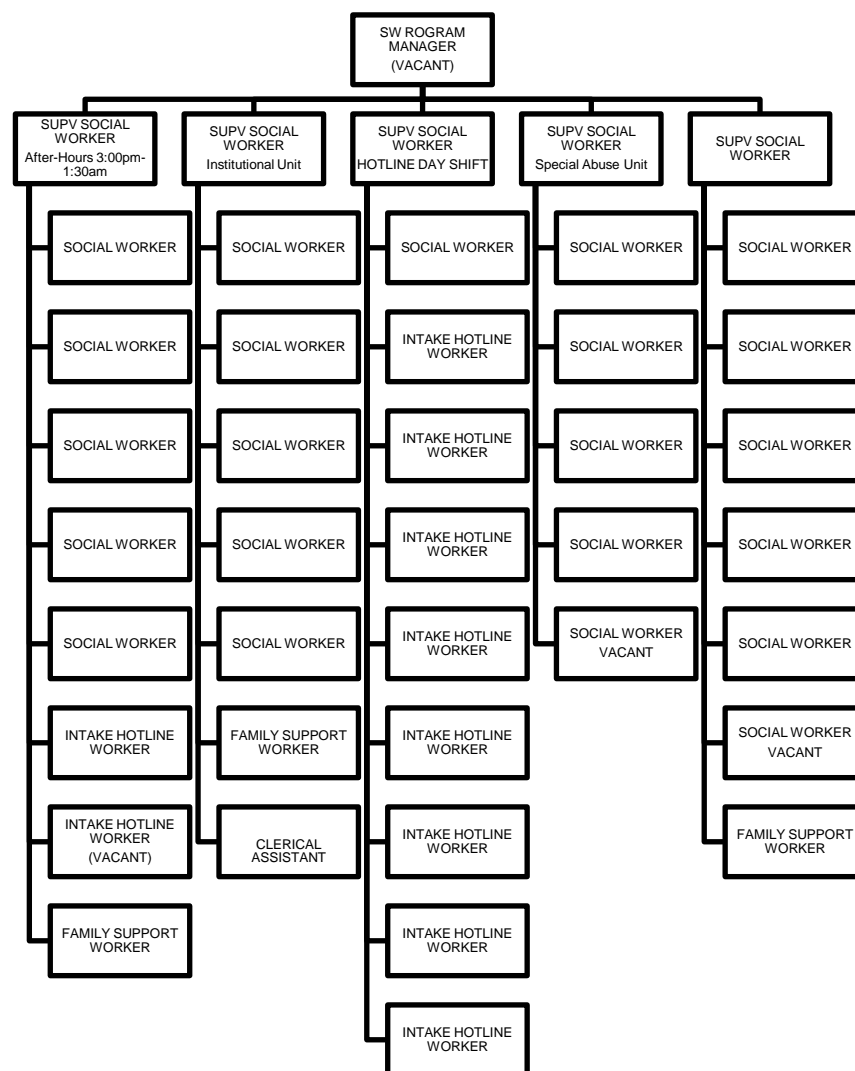
CPS Division II



ORGANIZATIONAL CHARTS

ORGANIZATIONAL CHARTS

CPS Division III



ORGANIZATIONAL CHARTS

EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

Overview

The Inspections and Evaluations (I&E) Division of the D.C. Office of the Inspector General (OIG) conducted an inspection of the Child Protective Services Administration (CPS) of the Child and Family Services Agency (CFSA) from October 2009 through July 2010. CFSA's mission is: "to improve the safety, permanence, and well being of abused and neglected children in the District of Columbia and to strengthen their families."¹

CFSA has four primary functions: (1) take and investigate reports; (2) assist families; (3) provide safe out-of-home care; and (4) re-establish permanent homes.² The focus of this inspection was to evaluate CPS's intake process, its investigations of abuse and neglect reports, and CPS's success in recruiting and retaining qualified social workers. The team conducted 32 interviews and issued a confidential survey to CPS employees. Interviewees included external stakeholders and subject matter experts, CPS agencies in other states, and CFSA employees. A list of the report's 11 findings and 23 recommendations is at Appendix 1.

Summary of Key Findings

Compliance with the 30-day investigation requirement is not consistently achieved and may compromise the quality of investigations. (Page 23) D.C. law requires CFSA to complete its investigations of alleged child abuse and neglect within 30 days and to finalize a report of its findings within 5 days thereafter. However, the *LaShawn A. v. Fenty (LaShawn)* Amended Implementation Plan (AIP) and internal CFSA policies and procedures require that both tasks be completed within 30 days. Employees stated that demanding caseloads coupled with the 30-day timeframe restrict social workers from conducting follow-up interviews with core contacts and identifying circumstances that may cause abuse or neglect. Consequently, the quality of investigations is not always as high as employees would like. For example, during an assessment of CPS investigations, the Court-Appointed Monitor³ found that 56 percent of sampled investigations were not of overall good quality because social workers had not interviewed individuals who could provide critical information to the investigation.⁴

Some mandated reporters within D.C. schools do not understand their legal obligations or the legal obligations of CPS social workers during investigations. (Page 32) D.C. Code § 4-1321.02(a) (Supp. 2010) requires certain private and government employees ("mandated reporters") to report knowledge or suspicion of any child who has been or is in immediate danger of mental or physical abuse or neglect. School officials and teachers are considered mandated reporters, and in 2009, D.C. Public Schools (DCPS) officials reported that all school employees would be required to take CFSA's online mandated reporter training. The Public Charter School Board (PCSB) agreed to facilitate training opportunities to mandated reporters within charter schools. As of May 2010, however, the Executive Office of the Mayor stated that neither had

¹ <http://cfsa.dc.gov/DC/CFSA/About+CFSA/Who+We+Are> (last visited July 20, 2010).

² *Id.*

³ The Center for the Study of Social Policy is the federal Court-Appointed Monitor for the *LaShawn A. v. Fenty* lawsuit. The Court-Appointed Monitor assesses and reports on CFSA's compliance with court-ordered performance requirements.

⁴ CENTER FOR THE STUDY OF SOCIAL POLICY, AN ASSESSMENT OF THE QUALITY OF CHILD ABUSE AND NEGLECT INVESTIGATIVE PRACTICES IN THE DISTRICT OF COLUMBIA 44 (May 24, 2010).

developed a system for monitoring whether school employees received training. CPS social workers reported that school personnel, especially within charter schools, were not always knowledgeable of what is, by law,⁵ considered abuse and neglect and were sometimes obstructive when CPS social workers attempted to interview children on school premises.

Employees reported that the occurrence and documentation of supervision are inconsistent. (Page 39) Best practices state that less advanced social workers should receive clinical supervision from skilled clinical social workers in order to develop the knowledge and skills to practice effectively. CFSA policies and procedures require that supervisory social workers provide weekly supervision for each investigation and enter annotated program and supervision notes in FACES.NET (FACES)⁶ after each supervisory meeting. Some supervisory social workers stated that they are not able to meet with their employees because social workers' schedules are unpredictable. Some supervisors also reported that they do not document supervisory meetings in FACES as required. When supervision is not conducted or documented, employees' professional development may be stunted, the quality of service provided to children may be deficient, and supervisors could be held liable for adverse outcomes if social workers do not appropriately handle investigations or follow through with their supervisory recommendations.

Additional Findings

The team also identified the following additional findings:

- Referrals for investigation are accepted even though the criteria for abuse or neglect are not always met.
- Pre-service training for new employees has improved, but a lack of funding has delayed implementation of an updated CPS-specific training curriculum.
- Program managers need additional support to oversee the midnight shift.
- Low morale and feelings of job insecurity contribute to turnover among CPS social workers.
- The average caseload per social worker metric masks social workers' caseloads that exceed the *LaShawn* requirement.
- Employees report limited healthcare safety items, child care necessities, and vehicles.

Developments of Note

The team identified the following areas as positive developments within CPS.

CFSA opened an onsite health assessment center. Children and youths must receive a health screening before initial foster care placement, change of placement, return to parents, and

⁵ D.C. Code § 16-2301 (Supp. 2010) provides definitions for acts constituting abuse or neglect.

⁶ FACES.NET, the District of Columbia's Statewide Automated Child Welfare Information System, is used for case management activities, such as documenting contacts and visits and writing case plans and court reports.

EXECUTIVE SUMMARY

conditional release to relative. A comprehensive health screening must be performed within 30 days of entering or reentering CFSA's care.⁷

In December 2009, CFSA opened the Healthy Horizons Assessment Center, which is a medical screening center located within CFSA's 400 6th Street, S.W. office. The center is open 24 hours a day, 365 days a year, and provides pre-placement and comprehensive health screenings for children/youth removed from their homes.⁸ Between January and May 2010, an average of 234 children per month who entered CFSA required a health screening. Prior to opening the Healthy Horizons Assessment Center, social workers took children to the Children's National Medical Center (also known as Children's Hospital) for health screenings.⁹ Employees stated that they often waited long periods to be seen by medical personnel, and CFSA reported that foster parents voiced concerns about timely assessments of children's medical needs.

CPS employees expressed appreciation for the Healthy Horizons Assessment Center, stating that it was convenient and reduced the length of time it takes to complete health screenings. However, CFSA has not fully realized the center's anticipated benefits. CFSA's Monthly Trend Analysis reports for the period of January 2010 to May 2010 showed that the percent of children who required and received health screenings had not exceeded 56% in a given month. CFSA wrote that:

As anticipated there has been a decline in documented performance as social workers adjust to the new process and new staff took on the responsibility for documenting the evaluations. A corrective action plan has been implemented to ensure that all children needing a medical evaluation receive it and that moving forward these are timely.¹⁰

CFSA continues to update internal policies and procedures. In October 2009, CFSA produced and distributed the agency's first Hotline Practice Guide. This guide incorporates practice recommendations from the National Resource Center for Child Protective Services

⁷ Additional medical services are provided to children and youth as needed. CFSA's Investigations Policy, Chapter 1000, Procedure C 15 (Sept. 30, 2003) states: "CFSA shall provide appropriate medical, psychological, or psychiatric evaluations of children as part of the investigation of abuse or neglect in cases where it is determined that such evaluations are necessary. All children, for whom such evaluations are necessary during the investigation period, shall receive the required evaluations during the investigation process and prior to the time the investigation is completed."

⁸ A nurse practitioner and a medical assistant are on duty at Healthy Horizons at all times. Nurse practitioners are licensed and fully qualified to conduct pre-placement and comprehensive health screenings. Medical assistants provide both clinical and administrative support. Both CFSA's nurse practitioners and medical assistants are contract employees.

⁹ Medico-legal examinations for children involved in sexual and physical abuse investigations are still conducted at Children's National Medical Center.

¹⁰ GOVERNMENT OF THE DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY (CFSA) MAY 2010 TREND ANALYSIS (July 23, 2010), available at http://cfsa.in.dc.gov/cfsa/lib/cfsa/pdf/executive_office/may_2010_trend_report_final.pdf (last visited Aug. 23, 2010).

EXECUTIVE SUMMARY

(NRCCPS)¹¹ and provides guidance and assistance for workers when documenting child abuse and neglect. A CPS supervisor and employee from CFSA's Office of Planning, Policy, and Program Support (OPPPS) trained hotline workers on how to use the guide, and an external consultant provided additional training. Annual hotline training is now provided to employees.

A CFSA senior manager stated that NRCCPS also assisted CPS with revising the Investigations Practice Guide. In December 2010, this manager reported that the guide was completed on September 30, 2010, and training on some elements occurred in November 2010. Publication and distribution of the Investigations Practice Guide were scheduled for January 2011. CFSA informed the OIG in March 2011, however, that the guide was undergoing additional revisions based upon feedback from the Court Monitor. (See page 10 for a description of the Court Monitor's responsibilities.)

Recommendations

The OIG made 23 recommendations to CFSA to address the deficiencies noted, strengthen internal controls, and increase operational effectiveness. Many recommendations focused on improving training, supervision, documentation, and availability of resources.

During the inspection, CFSA management and employees were cooperative and responsive.

CFSA reviewed the draft of this report prior to publication, and its comments in their entirety follow each OIG recommendation. The D.C. Public Schools and Public Charter School Board also reviewed a draft of the report's second key finding, and their comments follow each OIG recommendation.

Note: The OIG does not correct an agency's grammatical or spelling errors, but does format an agency's response in order to maintain readability of OIG reports. Such formatting is limited to font size, type, and color, with the following exception: if an agency bolds or underlines text within its response, the OIG preserves these elements of format.

Compliance and Follow-Up

The OIG inspection process includes follow-up activities with CFSA on findings and recommendations. Compliance forms with findings and recommendations will be sent to CFSA along with this report of inspection. I&E will coordinate with CFSA on verifying compliance with recommendations in this report over an established period. In some instances, follow-up activities and additional reports may be required.

¹¹ NRCCPS is operated by ACTION for Child Protection, Inc., a private non-profit organization. ACTION and its consultants provide advice, training, and technical assistance to child welfare agencies. See http://www.nrccps.org/about_nrccps.php (last visited July 26, 2010).

INTRODUCTION

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Background and Perspective

The Inspections and Evaluations (I&E) Division of the D.C. Office of the Inspector General (OIG) conducted an inspection of the Child Protective Services Administration (CPS) of the Child and Family Services Agency (CFSA) from October 2009 through July 2010. CFSA's mission is: "to improve the safety, permanence, and well being of abused and neglected children in the District of Columbia and to strengthen their families."¹²

CFSA has four primary functions: (1) take and investigate reports; (2) assist families; (3) provide safe out-of-home care; and (4) re-establish permanent homes.¹³ In FY 2010, CPS's approved budget was \$10,989,000 and there were 131 approved full-time equivalent (FTE) positions. On May 6, 2010, CFSA implemented a Reduction-in-Force (RIF). The resulting organizational changes occurred near the conclusion of the inspection team's fieldwork, and the findings presented do not reflect conditions identified following the RIF. During the inspection, the team found deficiencies that should be addressed by CFSA management, the District of Columbia Public Schools (DCPS), and the Public Charter School Board (PCSB).

Scope and Methodology

OIG inspections comply with standards established by the Council of Inspectors General on Integrity and Efficiency, and pay particular attention to the quality of internal control.¹⁴ The inspection objectives were to evaluate the sufficiency and quality of intake and investigations of abuse and neglect reports conducted by CPS and to review CPS's success in recruiting and retaining qualified social workers. The team also assessed the sufficiency of policies, procedures, and management controls, adherence to applicable laws and best practices, compliance with benchmarks established by the Court-Appointed Monitor for *LaShawn A. v. Fenty (LaShawn)*, and quality assurance.¹⁵ The team noted that CFSA opened an onsite health assessment center and continues to update internal policies and procedures.

The team issued a confidential survey to CPS employees and conducted 32 interviews. Interviewees included external stakeholders, subject matter experts, employees at CPS agencies in other states, and CFSA employees. A list of the report's 11 findings and 23 recommendations is at Appendix 1.

¹² <http://cfsa.dc.gov/DC/CFSA/About+CFSA/Who+We+Are> (last visited July 20, 2010).

¹³ *Id.*

¹⁴ "Internal control" is synonymous with "management control" and is defined by the U.S. Government Accountability Office as comprising "the plans, methods, and procedures used to meet missions, goals, and objectives and, in doing so, supports performance-based management. Internal control also serves as the first line of defense in safeguarding assets and preventing and detecting errors and fraud." STANDARDS FOR INTERNAL CONTROL IN THE FEDERAL GOVERNMENT, Introduction at 4 (Nov. 1999).

¹⁵ At the commencement of its inspection, the team learned that the Court-Appointed Monitor was in the process of conducting a case review to assess the quality of CPS investigative practices. Consequently, the inspection team did not conduct a case review in order to avoid duplication of efforts. This report is located at <http://www.cssp.org/CPSInvestigativePracticesRpt.pdf> (last visited Aug. 19, 2010).

Compliance and Follow-Up

The OIG inspection process includes follow-up with CFSA on findings and recommendations. Compliance forms were sent to CPS along with this report of inspection (ROI). The I&E Division will coordinate with CFSA on verifying compliance with recommendations in this report over an established period. In some instances, follow-up activities and additional reports may be required.

LaShawn

In 1989, the American Civil Liberties Union sued the District of Columbia on behalf of children in foster care under the supervision of the Department of Human Services (DHS)¹⁶ and children who had been reported as abused or neglected but were not yet in DHS care.¹⁷ In the lawsuit, captioned *LaShawn A. v. Barry*,¹⁸ the plaintiffs argued that the quality of services that DHS provided was inadequate. The U.S. District Court (Court) found the District liable and issued a Remedial Order in 1991 to improve agency performance. The District appealed this order, and a Modified Final Order (MFO) was issued, which was virtually identical to the original order and based on local law. As part of the order, the Center for the Study of Social Policy (CSSP) was appointed Court Monitor, and CSSP evaluated CFSA's compliance with Court-order performance requirements. (See Appendix 4 for a summary of two CSSP reports that assessed CFSA/CPS performance.) The District did not comply with the Remedial Order and the District's child welfare system was placed under receivership in 1995.¹⁹

The Court ended receivership in 2001, subject to a 2-year probationary period. CFSA was established as a cabinet-level agency within the Executive Office of the Mayor, and agency performance had to comply with an implementation plan (IP) developed by the Court. The IP, adopted in 2003, was designed to bring the District of Columbia government (the government) into full compliance with the MFO by December 31, 2006. In 2007, the IP was revised and succeeded by an Amended Implementation Plan (AIP) containing outcomes to be achieved by December 2008.²⁰ CFSA experienced a surge in reports of abuse and neglect in 2008 following a child fatality case, which hindered meeting the AIP deadline.²¹ The District and *LaShawn*

¹⁶ DHS's mission is to "coordinate and provide a range of services that collectively create the enabling conditions for economic and socially challenged residents of the District of Columbia to enhance their quality of life and achieve greater degrees of self-sufficiency." [Http://dhs.dc.gov/dhs/cwp/view,a,3,q,492334,dhsNav_GID,1461,dhsNav,%7C31045%7C,.asp](http://dhs.dc.gov/dhs/cwp/view,a,3,q,492334,dhsNav_GID,1461,dhsNav,%7C31045%7C,.asp) (last visited Apr. 19, 2010).

¹⁷ DHS had oversight of the District of Columbia's child welfare function prior to CFSA's establishment in 2001.

¹⁸ When lawsuits are filed against the District of Columbia government, the Mayor is listed as the defendant. Consequently, the title of the ongoing lawsuit is updated each time a new Mayor is elected to office. See *LaShawn A. v. Dixon*, 762 F. Supp. 959, 960 (D.D.C. 1991).

¹⁹ *LaShawn A. v. Fenty*, 701 F. Supp. 2d 84, 88 (D.D.C. 2010).

²⁰ The District Court approved the AIP on February 27, 2007. The AIP requires that the Court Monitor prepare and submit an interim performance report to the Court every 180 days that includes aggregate performance determinations in relation to the Outcomes to be Achieved and Outcomes to be Maintained as well as findings on Defendants' progress toward the final performance benchmarks.

²¹ In January 2008, CFSA's hotline was inundated with reports of abuse and neglect, subsequent to the District learning that a District resident who had been reported to CFSA was found living with the bodies of her four deceased children.

INTRODUCTION

plaintiffs established a 6-month plan to stabilize the agency and extended the deadline until June 2009.

In February 2009, the government filed a motion with the U.S. District Court to establish a definitive timeline for termination of the consent decree and to modify the court-order provisions authorizing the Monitor to provide consultation rather than approve, impose, or write the District of Columbia's plans, policies, and strategies. In April 2010, the District judge denied the government's motion to establish a definitive timeline, and ordered that both the government and the Monitor submit a new implementation plan. The government's motion to modify the Monitor's authority was granted in part and denied in part. The government was found in contempt for not consulting with CSSP when appointing a new Director of CFSA, and the judge stated that while the agency had met several AIP benchmarks, it had not yet demonstrated that these accomplishments were sustainable.

Reduction-in-Force (RIF)²²

On April 7, 2010, the Director of CFSA announced to CFSA employees during an all-staff meeting that a RIF of 54 positions was forthcoming. CFSA managers met with American Federation of State, County, and Municipal Employees (AFSCME) local 2401 (Union) representatives on April 26, 2010, for a consultation regarding the RIF. On May 6, 2010, 115 FTE positions were eliminated and 57 vacancies for newly created positions were announced. According to the CFSA Director, the terminations were in response to a significant reduction in the number of children and youth in CFSA's care and the need to reorganize specific areas within the agency with more skilled workers.²³ The eliminated positions included social services assistants (SSAs) who provided direct support to social workers. Fifty-two SSA positions were eliminated as part of the RIF, 16 of these within CPS. SSAs were informed that a new Family Support Worker (FSW) position was created that requires a bachelor's degree in social work or in a related social services field. SSAs who met this minimum qualification were encouraged to apply for the position, and 19 of the 35 FSWs who were hired were former SSAs.²⁴

CFSA and the Union entered into negotiations, but were unable to resolve their differences regarding the eliminated positions. Following the RIF, the team spoke with CFSA employees to learn about its impact on CPS personnel and operations. According to employees, CPS was experiencing a pronounced increase in reports of abuse and neglect to the hotline prior to the RIF. The RIF compounded this condition due to the elimination of support duties provided by former SSAs. The reduction in staffing made the timely completion of investigations harder to achieve and some employees worked overtime or additional hours to do so. In addition, some employees reported that some day shift social workers' caseloads were between 14 and 19 investigations following the RIF. High caseloads and a backlog of

²² CFSA and the Union entered into a collective bargaining agreement, referred to as a Master Agreement (effective through Sept. 30, 2010). According to the Master Agreement, a RIF is defined as "the separation of a permanent employee, his/her reduction in grade or pay, or his/her reduction in rank because of (a) reorganization, (b) abolishment of his/her position, (c) lack of work, (d) lack of funds, (e) new equipment, (f) job consolidation or (g) displacement by an employee with greater retention rights who was displaced because of (a) through (f) above." *Id* at 31.

²³ See email from the CFSA Director to all CFSA employees (May 6, 2010).

²⁴ On September 13, 2010, the Union filed a lawsuit in U.S. District Court challenging the RIF.

INTRODUCTION

investigations violated the *LaShawn* MFO.²⁵ A Union representative commented that there were complaints of children missing supervised visits with their parents and therapy sessions because CPS staff was not available to facilitate these meetings.

The decrease in FTEs as a result of the RIF, coupled with increased hotline calls and investigation caseloads, reduced employee morale and created feelings of job insecurity. One supervisory social worker stated:

Morale took a huge hit following the RIF, and it has taken an emotional toll on me. I have taken on additional duties, and I feel that the work I do is appreciated, but I also fear that any day I could be fired because I have seven cases in backlog My morale is poor because of the lack of job security and lack of personal time.

Supervisory social workers also reported that they had less time to allocate to supervision and other duties and responsibilities because they are monitoring children while they are on CFSA premises, transporting children to medical appointments, or assisting with clerical work. Social workers logged additional hours due to the increased caseload, and the number of attempts made to reach core and/or collateral contacts²⁶ declined. In August 2010, the inspection team learned that CFSA was in the process of establishing an additional day shift unit consisting of five social workers and one supervisor to address the increased caseload volume.

²⁵ According to *LaShawn* benchmarks, 90 percent of CPS investigations must be closed within 30 days.

²⁶ According to the *National Study of Child Protective Services Systems and Reform Efforts: Site Visits Report*, collateral contacts include communication with individuals who may have information about the family (e.g., physicians, social workers, psychologists, teachers, guidance counselors, law enforcement personnel, neighbors, and extended family members).

EMPLOYEE SURVEY

EMPLOYEE SURVEY

Survey Methodology

In November 2009, the team distributed 117 confidential online surveys,²⁷ and analyzed 44 complete responses received by December 7, 2009, which represent a response rate of 37.6 percent.²⁸

In addition to gathering demographic information from respondents, the survey consisted of two types of questions. First, employees responded to closed-ended statements by selecting from a Likert²⁹ scale of Highly Agree, Agree, Disagree, Highly Disagree, and Not Applicable. In the table of survey results on page 16, the Agree column represents the combined responses for the Agree and Highly Agree answers, while the Disagree column represents the combined responses for the Disagree and Highly Disagree answers. The table also lists the percentage and frequency of Agree and Disagree responses as well as the frequency of Not Applicable responses. The percentage of Agree and Disagree responses is based on the total number of Agree and Disagree responses, excluding Not Applicable responses. The second type of questions, open-ended questions, solicited employees' narrative feedback.

²⁷ The survey was not administered to the CPS Administrator or CFSA senior management.

²⁸ While the team received 45 responses, one survey was excluded because only the two initial background questions were answered.

²⁹ A Likert scale measures a respondent's level of agreement with a statement.

EMPLOYEE SURVEY

Table 1: Employee Survey—Responses to Closed-Ended Questions

Item	Percent and Frequency		Frequency
	Agree	Disagree	Not Applicable
1. Are you currently a manager or supervisor at CPS?	25.0% (11)	75.0% (33)	0
2. How long have you worked at CPS? ³⁰			
3. CPS ensures that I am adequately trained to perform my duties and responsibilities.	63.6% (28)	36.4% (16)	0
4. The training I received within the past year was effective.	65.0% (26)	35.0% (14)	4
5. There are written policies and procedures that cover all key aspects of my duties and responsibilities.	52.3% (23)	47.7% (21)	0
6. My job description accurately reflects what I do on a daily basis.	67.4% (29)	32.6% (14)	1
7. I have sufficient resources (i.e., equipment, supplies, etc.) to perform my duties and responsibilities.	25.0% (11)	75.0% (33)	0
8. The FACES system adequately supports CPS functions.	54.5% (24)	45.5% (20)	0
9. Within the past 2 years, CPS has hired qualified employees to fill vacant positions.	52.6% (20)	47.4% (18)	6
10. What is your caseload? 1-5 cases 6-9 cases 10-12 cases 13 or more cases	4.8% (1) 19.0% (4) 42.9% (9) 33.3% (7)		23
11. My caseload is manageable.	66.7% (16)	33.3% (8)	20 ³¹
12. My division has enough employees to complete work timely.	31.0% (13)	69.0% (29)	2
13. My direct supervisor provides me with useful and constructive feedback when reviewing my work.	76.2% (32)	23.8% (10)	2
14. A supervisor or more senior staff member encourages my professional development.	55.8% (24)	44.2% (19)	1
15. I receive recognition or praise when I perform well.	54.5% (24)	45.5% (20)	0
16. Morale is positive at CPS.	18.2% (8)	81.8% (36)	0
17. Current compensation levels allow CPS to attract qualified candidates.	52.4% (22)	47.6% (20)	2
18. I am adequately compensated for my position.	38.6% (17)	61.4% (27)	0
19. How much longer do you see yourself working at CPS? ³²			

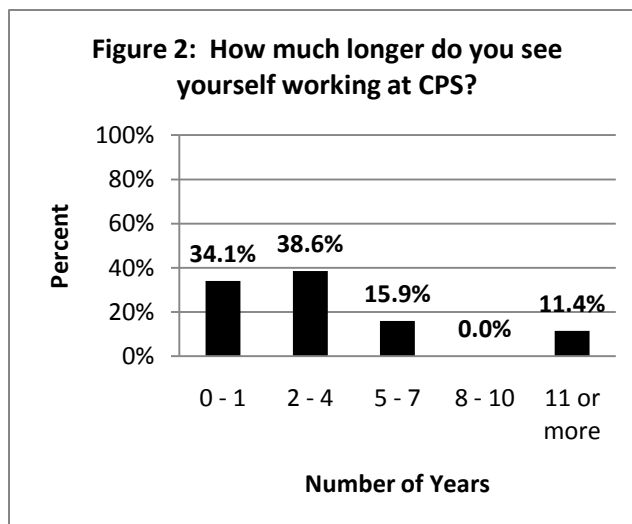
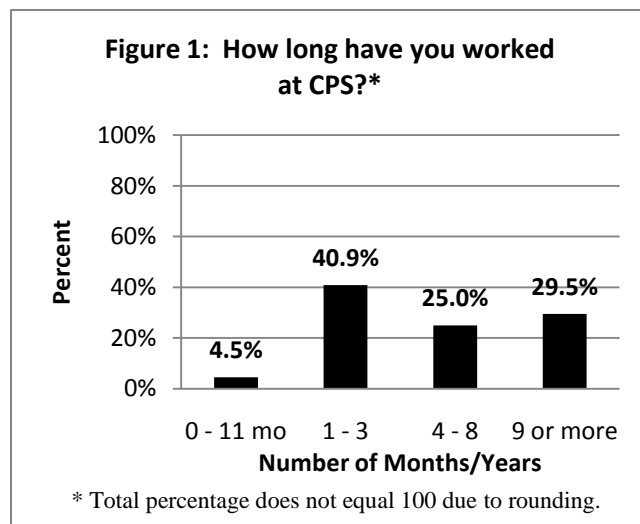
³⁰ See Figure 1 on page 17 for response rates to the question, “How long have you worked at CPS?”

³¹ Twenty-three of the 44 survey respondents replied that question 10, “What is your caseload,” did not apply. However, only 20 of the 44 respondents replied that statement 11, “My caseload is manageable” did not apply.

³² See Figure 2 on page 17 for response rates to the question, “How much longer do you see yourself working at CPS?”

EMPLOYEE SURVEY

Seventy-five percent (33) of the survey's respondents indicated that they were not a CPS manager or supervisor. As reflected in Figures 1 and 2 below, a majority of the respondents had been employed with CPS for 1 to 3 years, and approximately 1/3 of respondents did not anticipate working at CPS for more than 1 additional year.



Employees were asked what issues, if any, would motivate them to leave their current job or search for employment elsewhere. Respondents most frequently stated they would leave CPS if their compensation and work environment did not improve or there were no opportunities for career growth.

The team considers the following survey items to be of particular interest:

- Seventy-five percent of employees disagreed with the statement, “I have sufficient resources (i.e., equipment, supplies, etc.) to perform my duties and responsibilities;”
- Sixty-nine percent of employees disagreed with the statement, “My division has enough employees to complete work timely;”
- Approximately 82 percent of employees disagreed with the statement, “Morale is positive at CPS;” and
- Approximately 61 percent of employees disagreed with the statement, “I am adequately compensated for my position.”

Results from Open-Ended Survey Questions

When answering the question regarding what is done well at CPS, the most frequent responses spoke to employee teamwork and dedication. One employee commented: “CPS social workers and social services assistants^[33] are team players when it comes down to

³³ This survey was administered prior to CFSA's May 2010 reorganization; therefore, references to the SSA position are included in this survey even though the position was eliminated.

providing services on [an] emergency basis with low numbers of staff.” Another respondent wrote: “Social workers seem to really care about the families and work hard to ensure that [] safety and well-being [are] maintained.” Another employee wrote, “follow through with assessing the children in the household who are not the victims, to see if they are safe” is done well.

Responses to the question regarding what is not done well at CPS varied. Respondents identified the following: unavailability of cars; lack of office supplies; infrequent communication from upper management to line staff; lack of staffing and supervision; and inconsistency in the application of policies. Employees also stated that the hotline screening process is flawed and referrals are accepted even though they do not meet abuse/neglect criteria.³⁴

When asked what should be done to improve CPS’s efficiency and effectiveness, suggestions included: developing and consistently applying policies and procedures; having sufficient resources such as cars and supplies; providing employee training and mandated reporter training to major stakeholders; improving the referral screening process; expanding the timeframe for completing investigations; and improving communication between managers and employees.

Respondents providing feedback on the statement, “Please provide any other information that you believe may be relevant to our inspection,” wrote that management should consistently follow policies and procedures, more child care supplies should be stored onsite, and food vouchers and car seats should be more accessible to after-hours shifts.

³⁴ See Finding 4, “Referrals for investigation accepted even though the abuse or neglect criteria are not always met,” on page 47 of the ROI.

**Findings and
Recommendations:
KEY FINDINGS**

KEY FINDINGS

Overview of Intake and Investigation Processes

CPS conducts intake of reports of known or suspected child abuse and neglect and investigates reports indicating that a child may have suffered abuse or neglect as defined by law. Intake is conducted through CFSA's hotline,³⁵ which operates 24 hours, 7 days per week. When a call comes into the hotline, employees use a screening tool to categorize calls as either an "information and referral" (I&R) or a CPS referral containing allegations of abuse and/or neglect.³⁶ Referrals are assigned to CPS social workers who investigate the nature, extent, and cause of reported abuse and neglect allegations. In FY 2009, CFSA accepted 6,556 investigations.³⁷

CPS referrals for investigation are classified as either a Priority Level 1 or Priority Level 2 referral. Priority Level 1 referrals, also known as "Immediates," require that a social worker initiate the investigation within 2 hours of CPS's receipt of the referral, regardless of whether the referral is received during traditional business hours. An investigation is initiated by establishing face-to-face contact with the child and speaking to him/her outside of the presence of caretakers. Referrals involving severe physical abuse and sexual abuse are classified as Level 1 and these investigations are conducted in collaboration with the Metropolitan Police Department's (MPD) Youth Investigations Division (YID).³⁸ Priority Level 2 referrals require initiation within 24 hours.³⁹ Examples of Level 2 referrals include educational neglect or inadequate provision of food, shelter, or clothing.

A Hotline Screening Panel, consisting of CPS employees and a member of the Healthy Families/Thriving Communities (HFTC) Collaborative Council,⁴⁰ convenes each morning to review Priority Level 2 referrals received within the past 24 hours. The panel's objective is to ensure that these reports meet abuse and neglect criteria, and to screen out referrals that do not. Referrals are then assigned to social workers for investigation. (See Appendix 2 for a list of the types of reports requiring immediate and 24 hour responses. Appendix 3 contains a flow chart of the intake process.)

³⁵ According to CFSA's website: "This hotline is the gateway to protection and help for child victims and those at risk up to age 18 in the District of Columbia." <http://cfsa.dc.gov/DC/CFSA/Support+the+Safety+Net/Report+Child+Abuse+and+Neglect> (last visited July 19, 2010).

³⁶ CFSA's Hotline Policy states that hotline workers answer all calls, address all walk-in community members, thoroughly gather information from the reporter, and determine if the call is a report of alleged child abuse and/or neglect or an information and referral.

³⁷ See CFSA's Agency FY 2010 Performance Plan located at <http://capstat.oca.dc.gov/Pdf.aspx?pdf=http://capstat.oca.dc.gov/docs/fy10/CFSA.pdf> (last visited Aug. 20, 2010).

³⁸ The Youth Investigations Division was formerly known as the Youth Protective Services Division (YPSD). CFSA's Investigations Policy (p. 10) states: "CFSA is mandated by law to notify the MPD when it receives a report of abuse. CFSA shall work jointly with YPSD to investigate reports of child maltreatment involving sexual abuse or severe physical abuse. The Hotline staff shall forward all reports of sexual abuse or physical abuse cases to YPSD"

³⁹ The D.C. Code requires that CPS social workers initiate investigations within 24 hours of receipt of the report, but the *LaShawn* AIP standard allows up to 48 hours for initiation. D.C. Code § 4-1301.04(b) (2008).

⁴⁰ The HFTC Collaborative Council is a 501(c)(3) organization that "provides leadership, resource development, technical assistance, and training to the six Healthy Families/Thriving Communities Collaboratives." <http://dccollaboratives.org> (last visited Aug. 18, 2010).

KEY FINDINGS

At the onset of an investigation, social workers complete an initial safety assessment to determine the immediate threat of danger or harm to the child and his/her siblings. The assessment should identify the family's strengths, needs, challenges, capacity, and willingness to provide for and protect the child. Initial safety assessments must be completed within 24 hours of face-to-face contact with the child victim, and a supervisory social worker must review and approve the social worker's assessment. If the social worker determines that the child's safety is at risk, the social worker's supervisor and program manager can authorize immediate removal of the child from the home.

During the investigation, social workers interview the child victim(s), reporter of abuse and/or neglect, caregivers, family members, teachers, and alleged perpetrator(s). Social workers assess the child's statements, alleged perpetrator's statements, collateral statements, physical evidence, medical findings, and records or reports to determine whether the allegations of maltreatment should be substantiated.

At the end of an investigation, social workers must conduct a risk assessment to determine the potential for future abuse and/or neglect occurring in the next 18 to 24 months. Families with low or moderate scores on their risk assessment are referred to one of six HFTC Collaboratives (Collaboratives) for additional services.⁴¹ Collaborative services are voluntary, and families decide whether they want to receive them. Families with high or intensive risk assessment scores are assigned to a social worker within CFSA's In-Home Unit. The In-Home worker assists families in developing and reaching established goals, following-through with service referrals, and ensuring the safety, stability, and well-being of children.

According to D.C. Code § 4-1301.06(a), social workers have 30 days to complete investigations and determine whether reported abuse or neglect occurred. Once an investigation is completed, District law allows social workers 5 days to complete the final report.⁴² However, the *LaShawn* AIP and CFSA's internal policies and procedures require that final dispositions⁴³ and case closures are completed within 30 days rather than 35, as allowed by the D.C. Code. An investigation can have one of the following three dispositions:

substantiated - a report which is [confirmed] by credible evidence and is not against the weight of the evidence (e.g. educational neglect – a child's school record reveals that the child has never attended school)[;]

unfounded - a report which is made maliciously or in bad faith or which has no basis in fact (e.g. the family has no children)[; or]

⁴¹ Each Collaborative is an independent, non-profit-organization. "The Collaboratives' vision is to develop and sustain a seamless network of community partners throughout the District of Columbia that work to build strong families and supportive communities in which children, youth, and adults can safely and productively reside and thrive." http://dccollaboratives.org/?page_id=96 (last visited Mar. 31, 2010).

⁴² D.C. Code § 4-1301.06(c)(1)(2008).

⁴³ CFSA Administrative Issuance (CFSA-09-16) states: "The resultant findings of the investigation are called 'dispositions' and are based upon credible and documented evidence, including interviews, safety assessments, risk assessments, available physical evidence, and possibly past involvement with CFSA or other District social service agencies." *Id* at 1.

KEY FINDINGS

inconclusive - a report which cannot be proven as either substantiated or unfounded (e.g. the alleged maltreater is reported to be a substance abuser but [the] Investigations Worker is unable to locate the maltreater)[.]⁴⁴

1. Compliance with the 30-day investigation requirement is not consistently achieved and may compromise the quality of investigations.

Criteria:⁴⁵ D.C. Code § 4-1301.06(b) provides:

[An] investigation shall determine:

- (1) The nature, extent, and cause of the abuse or neglect, if any;
- (2) If mental injury... is suspected, an assessment of the suspected mental injury by a physician, a psychologist, or a licensed clinical social worker;
- (3) If the suspected abuse or neglect is ... substantiated: ...
 - (E) Whether any child who is at risk should be removed from the home or can be protected by the provision of resources, such as those listed in §§ 4-1303.03 and 4-1303.03a.

D.C. Code § 4-1303.03(a) states, in part:

The Director of the Agency shall have the following duties and powers ...

(13) To provide protective service clients appropriate services necessary for the preservation of families, or to contract with private or other public agencies for the purpose of carrying out this duty. These services may include:

- (A) Emergency financial aid;
- (B) Emergency caretakers;
- (C) Homemakers;
- (D) Family shelters;
- (E) Emergency foster homes;
- (F) Facilities providing medical, psychiatric, and other therapeutic services;
- (G) Day care;
- (H) Parent aides;
- (I) Lay therapists; and
- (J) Respite care

⁴⁴ *Id* at 1-2.

⁴⁵ “Criteria” are the rules that govern the activity being evaluated by the OIG inspection team. Examples of criteria include internal policies and procedures, District and/or federal regulations and laws, and best practices.

KEY FINDINGS

During the course of investigations, social workers must interview at minimum, the reporter, child victim, all children in the household, the alleged perpetrator, and the parents and/or caretakers. The U.S. Department of Health and Human Services stresses the importance of such interviews and writes that child welfare agencies must determine whether child abuse and neglect can be substantiated, as well as establish rapport with family members and engage them in the intervention process.⁴⁶ Internal policies and procedures and the social worker position description require that social workers assess the strengths and needs of families, review pertinent information, and make necessary service referrals to assist families.⁴⁷ According to a CFSA senior manager, CPS social workers make recommendations and referrals for services as part of the initial investigation and often even prior to disposition. For example, social workers may make referrals for substance abuse, mental health, or domestic violence treatment.

As previously mentioned, D.C. Code allows 30 days to complete the investigation and 5 additional business days to write the report; however, the *LaShawn* AIP and internal CFSA policies and procedures require that both responsibilities are completed within 30 days.⁴⁸ To ensure the quality of child abuse and neglect investigations, supervisory social workers are required to review and authorize each step of the investigation process, including safety assessments, social workers' case notes, action plans, risk assessments, and recommended dispositions. CFSA also conducts a monthly review process called Grand Rounds, whereby individuals from CFSA's CPS, Quality Assurance, Legal, Office of Training Services Administration (OTS), and In-Home and Out-of Home Administrations meet to discuss two randomly selected open investigations. This team evaluates compliance with regulations and best practices using an assessment tool, and makes recommendations on how to proceed with the investigation.

Condition:⁴⁹ Several CPS employees stated that 30 days is not a sufficient amount of time to complete a thorough investigation and write the final investigative report. Some social workers stated that they feel rushed when completing investigations within this timeframe and that the quality of investigations is impacted as a result. Employees reported that additional interaction with the family, core and collateral contacts, and MPD is needed to improve the quality of investigations. Obtaining additional information from these individuals gives social workers a more thorough understanding of family dynamics, which allows social workers to identify appropriate service referrals and understand the causes of abuse or neglect. One social worker stated that a demanding caseload coupled with the 30-day timeframe restricts him/her from conducting follow-up interviews with core contacts and developing a rapport with the family. This social worker also stated:

⁴⁶ DIANE DePANFILIS, MARSHA K. SALUS, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION ON CHILDREN, YOUTH AND FAMILIES CHILDREN'S BUREAU, OFFICE ON CHILD ABUSE AND NEGLECT, CHILD PROTECTIVE SERVICES: A GUIDE FOR CASEWORKERS 26 (2003).

⁴⁷ CFSA's Investigations Policy, Chapter 1000, Procedure U (Sept. 30, 2003) states: "When the child is in immediate or imminent danger, the Investigations Worker shall consider a broad range of safety-oriented responses, including those that protect a child without taking custody of the child (e.g. making a referral or putting in services to ameliorate the abuse or neglect, including extended family supports)."

⁴⁸ Investigations resulting in a child's removal from the home and investigations conducted by CPS special abuse and institutional abuse units have different time standards for completion.

⁴⁹ The "condition" is the problem, issue, or status of the activity being evaluated by the OIG inspection team.

KEY FINDINGS

After the initial contact with a family, we may want to conduct a follow-up interview in the event that something [significant] has happened since our initial meeting. Follow-up interviews also help build rapport with the family. However, if the investigation has been open for almost 30 days and I have a heavy caseload, a follow-up interview is not always feasible, and I will close the investigation without conducting one.

In its June 2010 report entitled “An Assessment of the Quality of Child Abuse and Neglect Investigative Practices in the District of Columbia” (2010 Case Review),⁵⁰ the Court-Appointed Monitor, CSSP, collected a sample of 190 cases and assessed CPS’s compliance with *LaShawn* AIP standards. CSSP determined that 56 percent of the investigations in its sample were not of high quality. CSSP considered an investigation to not be of high quality when social workers did not interview critical individuals, such as school personnel, medical and mental health professionals, relatives, or staff within CFSA’s ongoing and foster care units.⁵¹ These results corroborated CPS employees’ comments regarding the lack of follow-up with core and collateral contacts having adverse effects on the quality of investigations. The Court-Appointed Monitor also found that social workers do not adequately address families’ immediate service needs during investigations, and there were inconsistencies in families being referred or connected to services during investigations.

The inspection team interviewed a member of CFSA’s Quality Assurance division, who reported concerns with the quality of CPS investigations. According to this employee, failure to identify the reason for abuse and neglect was a recurring deficiency. This individual stated: “[I]nvestigators are good at meeting the investigative requirements (i.e., making the core contacts), but improvement is needed with regard to determining the cause of the abuse or neglect that took place.” The inspection team reviewed six Grand Rounds reports completed between April and June 2009 to assess whether social workers had fulfilled case-specific recommendations made by the Grand Rounds Panel. Of the 26 recommendations issued, 15.4 percent were completed, 65.4 percent were not completed, and 19.2 percent were partially completed. Failure to complete these recommendations may have detracted from the overall quality of the investigations.

Cause:⁵² A surge in reports of abuse and neglect and relatively high employee turnover rates impacted the quality and timeliness of investigations. The number of investigations increased 47.7 percent from calendar year (CY) 2007 to 2008 and remained relatively high during CY 2009. (See Table 2.) The increased

Table 2: Volume of Hotline Calls and Investigations
(Source: CFSA Director’s Testimony for FY 2009 Agency Performance Oversight Hearing)

	2007	2008	2009
Hotline calls	7,435	11,445	11,041
Investigations opened	4,926	7,278	6,516

⁵⁰ The District Court appointed CSSP to monitor CFSA’s compliance with Court-order performance requirements and the related *LaShawn* implementation plan. Areas of assessment included: use of a screening tool in prioritizing response times for initiating investigations; conducting appropriate interviews with needed collateral contacts and with all children in the household outside the presence of the caretaker, parents, or caregiver; and completing a full systematic analysis of a family’s situation and the factors placing a child at risk.

⁵¹ See <http://www.cssp.org/CPSInvestigativePracticesRpt.pdf> (last visited Aug. 14, 2010).

⁵² The “cause” is the action or inaction that brought about the condition being evaluated by the OIG inspection team.

KEY FINDINGS

volume of investigations led to higher caseloads for social workers, which limits the amount of time that a social worker has to gather information on each case and establish rapport with key individuals. Furthermore, the turnover rate for social workers was 20 percent in FY 2008 and 21 percent in FY 2009. Turnover among staff temporarily increases caseloads for remaining social workers, and high caseloads impact social workers' ability to complete thorough investigations within 30 days.

When responding to FY 2009 Performance Oversight questions before the D.C. Council, the CFSA Director identified the requirement to complete investigations in 30 days as a statutory impediment to CFSA's operations. The Director submitted written testimony that stated: "The requirements for [] investigation[s,] inability to locate famil[ies,] and the complexity of investigations [do] not always allow for completion within 30 days."⁵³ The team also asked a CFSA senior manager whether completing investigations and corresponding reports within 35 days was a sufficient amount of time. This individual responded that it depends on the case and commented:

Some [investigations] are more complex than others and require more time. For example, ["unable to locate"] cases involve families that are transient between Maryland and D.C.[,] and finding an address [for the family] can be difficult. We also receive reports containing limited information. For example, we may receive a call stating that a storeowner hit [a] child. All we have is the location of the store; we do not know the names of the involved parties or any other pertinent information. Lastly, sexual abuse cases or severe physical abuse [investigations may] require that we incorporate information from MPD's findings, so we have to wait on them [to provide a report] sometimes.

Effect:⁵⁴ The OIG inspection team observed that over a 6-year timeframe (FYs 2004 to 2009), CPS did not meet the *LaShawn* requirement of closing investigations within 30 days. (See Table 3 on page 27.) In FY 2009, CPS did, however, close 95 percent of investigations within 35 days. When cases are not closed within 30 days, they are considered backlogged, which violates the *LaShawn* court order. As of December 31, 2009, CPS had 21 backlogged investigations (this figure excludes institutional abuse investigations).⁵⁵ Seventeen of these investigations were in backlog for a period of 31-60 days; 4 were in backlog for 61 or more days.

⁵³ According to the CFSA Director, requests to modify the 30-day requirement need only to be submitted to the Council for modification of the D.C. Code because the AIP has now expired.

⁵⁴ The "effect" is the impact of the condition being evaluated by the OIG inspection team.

⁵⁵ Institutional abuse investigations were excluded because they adhere to a different closure timeframe. The *LaShawn* AIP allows 60 days to complete investigations involving group homes, day care settings, or other congregate care settings.

KEY FINDINGS

Table 3: Percentage of CPS investigations completed within 30 days							
Measure		FY04	FY05	FY06	FY07	FY08	FY09
Child Abuse and/or Neglect Investigations Completed Within 30 Days	Target	80%	75%	80%	95%	100%	100%
	Actual	48%	50%	62%	64%	21% ⁵⁶	60.7%

Source: This data was obtained from CFSA's FYs 2007, 2009, and 2011 performance measure data and from the District of Columbia 2009 Annual Progress and Services Report.

Social workers also stated that the constant pressure to complete investigations within 30 days increases stress levels, burn out, employee turnover, and feelings of low morale. Several employees reported that they work additional hours or unpaid overtime in order to close their investigations within 30 days. A CPS senior manager stated that investigations completed within a 30-day timeframe are more superficial in nature because the social worker's main objective is to determine a disposition for the case rather than arranging and coordinating care. This manager added that completing investigations within such a short timeframe, without conducting a thorough investigation, may lead to the premature removal of a child or substantiation of a referral based on a surface-level assessment. This manager suggested that a 45- to 50-day timeframe may be ideal.

The inspection team asked a CSSP senior employee whether expanding the 30-day timeframe would help improve the quality of CPS investigations. The employee stated that jurisdictions around the country have varying timeframes such as 30, 45, or 60 days for closing cases; a 45- to 60-day requirement may be more realistic, but CPS would need to ensure that social workers have more collateral contacts and that service referrals for clients are put in place. This employee added that if CFSA extended its timeframe to 45 days, for example, it is possible that the quality of investigations might improve, but one cannot be certain. Variables such as training, employee skill level, and supervision also impact the quality of investigations.

Accountability:⁵⁷ Social workers, supervisory social workers, and program managers are all responsible for ensuring that thorough investigations are completed within the 30-day timeframe. In the event that the Director of CFSA determines that a longer timeframe for completing CPS investigations is warranted, the D.C. Council, Mayor, and United States Congress would have to approve a modification to D.C. Code § 4-1301.06(a).

Recommendations:

- (1) That the Director of CFSA (D/CFSA) conduct an internal study to determine a more feasible timeframe for completing investigations and provide the results to the D.C. Council, *LaShawn* Plaintiffs, and the United States District Court Judge.

⁵⁶ During FY 2008, CFSA experienced a surge in reports of abuse and neglect allegations following the discovery of the deaths of four children. A significant backlog of CPS investigations developed, which explains the low FY 2008 percentage of abuse and neglect investigations completed within 30 days.

⁵⁷ "Accountability" is a description of who is responsible for the condition being evaluated.

KEY FINDINGS

Agree X Disagree

- (2) That the D.C. Council consider expanding CFSA's requirement for completing investigations to a new timeframe as agreed upon by the D/CFSA, Court-Appointed Monitor, LaShawn Plaintiffs, and the United States District Court Judge.

Agree X Disagree

- (3) That the D/CFSA update performance goals, policies and procedures, and performance standards when an expanded timeframe for investigations is agreed upon and implemented.

Agree X Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds that it agrees with the recommendation to expand the number of days to perform quality investigations. CFSA requests that in the alternative of implementing a study, CFSA requests that it is allowed to perform the following things: (1) review the feasibility of adding a new CPS Investigation Unit; (2) re-align the CPS units to compliment distribution of caseloads; (3) include investigations exceeding 30 days into the 18-day Reviews to assess readiness and barriers to closure; and (4) add investigations exceeding 30 days to the Monthly Enhanced Grand Rounds meetings.

Errors and Inconsistencies found by CFSA in the Report

In reference to the CPS Organization Chart originally used for this report by the OIG, CFSA states and responds that the CPS Organizational Chart does not reflect the 24 hours a day 7 days a week services provided by the CPS unit.

In reference to the report by CSSP mentioned on page 2 [3] of this report, CFSA states and responds that CSSP has stated that the quality of investigations had improved as compared to the investigations performed in 2006.

In reference to monitoring of school employees listed on page 3 [4] of this report, CFSA states and responds that it has consistently provided access to on-line and in-person training to DCPS and Charter Schools. However, CFSA does not have the authority nor the resources to track the training activities of DCPS and Charter School employees.

In reference to weekly supervision of investigations referenced on page 3 [4] of this report, CFSA states and responds that it holds daily screening panels to ascertain and to determine if an investigation is appropriate.

KEY FINDINGS

30 *In reference to supervision not being conducted mentioned on page 3 [4] of this report,*
31 *CFSA states and responds that supervision in the CPS section is carried out in many forms (i.e.*
32 *accompanying social workers on home visits, medical appointments, court hearings and*
33 *placements) that are not necessarily carried out in a formal manner. These less formal*
34 *supervisory instances are always used as teachable moments while engaged in actual job related*
35 *activities.*

36
37 *In reference to Pre-Service training as mentioned on page 3 [4] of this report, CFSA*
38 *states and responds that specific CPS training was provided in November 2010.*
39

40 *In reference to average caseload per social worker listed on page 3 [4] of this report,*
41 *CFSA states and responds that the latest data evidenced very few investigative social workers*
42 *had caseloads that exceed the metric. However, the denominator for the caseload count only*
43 *includes investigative social workers with at least one assignment. Consequently, the caseload*
44 *average is considerably lower than the LaShawn requirement.*
45

46 *In reference to the Investigations Practice Guide mentioned on page 5 [6] of this report,*
47 *CFSA states and responds that the Investigations Practice Guide is currently undergoing*
48 *additional revisions based upon feedback from CSSP (Federal Court-Appointed Monitor).*
49

50 *In reference to the Reduction-in-Force (RIF) mentioned on page 7 [9] of this report,*
51 *CFSA states and responds that although a RIF occurred, none of the RIF'd employees were CPS*
52 *Social Workers. Family Support Workers (FSWs) were hired in July and August to support the*
53 *CPS units. Additionally, a supervisory unit was detailed using staff members from other*
54 *departments within CFSA to provide additional resources based upon a surge in investigations*
55 *that occurred in April and May of that year.*
56

57 *In reference to CFSA as a named party to the LaShawn lawsuit mentioned on page 8 [10]*
58 *and throughout this report, CFSA states and responds that CFSA is not a named party to the*
59 *LaShawn matter and all reference to CFSA should be listed as the District of Columbia when*
60 *mentioned as a party to the LaShawn lawsuit.*
61

62 *In reference to AIP benchmarks mentioned on page 9 [11] of this report, CFSA states*
63 *and responds that on December 17, 2010, the Federal Court issued an Order that specifies the*
64 *implementation and Exit Plan for the District.*
65

66 *In reference to Family Support Workers (FSW's) mentioned on page 9 [11] of this report,*
67 *CFSA states and responds FSW's [sic] were hired in July and August of 2010.*
68

69 *In reference to day shift social workers having a caseload of 14 and 19 investigations as*
70 *listed on page 9 [11] of this report, CFSA states and responds that this report seems to be*
71 *inaccurate as it provides no data compiled from the FACES system.*
72

73 *In reference to CPS workers facilitating visit as mentioned on page 9 [12] of this report,*
74 *CFSA states and responds that CPS workers would not facilitate these types of visits. For*
75 *clarification purposes, if a child is removed from their parental home, a social worker from an*

KEY FINDINGS

76 *Out of-Home unit in CFSA or a private agency would perform this visitation not a CPS worker.*
77 *It must be noted that during this specific time period, supervisors assisted social workers to*
78 *ensure that visits and medical appointments of children in CFSA's care occurred.*

79 *In reference to social workers logging additional hours as mentioned on page 10 [11] of*
80 *this report, CFSA states and responds that this statement has not been confirmed as accurate*
81 *because no data from the FACES system was included to make this determination.*
82

83 *In reference to establishing an additional day shift unit as mentioned on page 10 [12] of*
84 *this report, CFSA states and responds that in October 2010 an additional CPS unit was added to*
85 *ensure that appropriate staffing was in place to address any fluctuating need for the entire CPS*
86 *Administration.*
87

88 *In reference to social workers duties at the end of an investigation as mentioned on page*
89 *18 [22] of this report, CFSA states and responds that at the end of an investigation social*
90 *workers interview the alleged child victim(s), reporters of abuse and/or neglect, caregivers,*
91 *family members, teachers and alleged perpetrator(s).*
92

93 *In reference to the term "sever risk" as listed on page 18 [22] of this report, CFSA states*
94 *and responds that it does not use the term "severe" it only uses the term "intensive" when*
95 *referencing a higher level of risk associated with a family.*
96

97 *In reference to CFSA's In-home Unit as listed on page 18 [22] of this report, CFSA*
98 *states and responds that a safety plan is performed when CFSA becomes involved with a family*
99 *to ensure a safe environment for the child(ren).*
100

101 *In reference to CFSA's In-Home Unit as listed on page 18 [22] of this report, CFSA*
102 *states and responds as a point of clarification, when a child is removed from the parental home a*
103 *case is opened and case responsibility is transferred to a CFSA out of home worker or a private*
104 *agency worker depending on the placement of the child.*
105

106 *In reference to a 95% compliance rate by CFSA regarding investigations as listed on*
107 *page 22 [26] of this report, CFSA states and responds that on December 17, 2010, Judge Hogan*
108 *issued an order which requires CFSA to complete 90% of investigations within 35 days. It must*
109 *be noted that CFSA is consistently meeting this standard.*
110

111 *In reference to cases in backlog in excess of 31 days as listed on page 22 [26] of this*
112 *report, CFSA states and responds that some cases in backlog are a result of matters outside the*
113 *control of CFSA (i.e. waiting for MPD to complete investigations or waiting for other*
114 *jurisdictions to complete information regarding the safety of the child(ren) whom have relocated*
115 *to other jurisdictions).*
116

117 *In reference to Table 3 as listed in this report on page 23 [27], CFSA states and responds*
118 *that this data is skewed because the table doesn't include FY2011 and the source uses FY2011*
119 *data.*

KEY FINDINGS

OIG Response: The OIG acknowledges CFSA's comments contained in the "Errors and Inconsistencies found by CFSA in the Report" sections, but disagrees with its use of such terminology. The OIG observed that in many instances, information categorized as an error or inconsistency was in actuality additional contextual information provided by CFSA, stated by the OIG in a subsequent section of the ROI, or occurred after the OIG completed its fieldwork in July 2010.

CFSA's response in lines 3 through 9 appears to meet the intent of recommendation one.

In lines 21 through 24 of CFSA's response, CFSA implies that the OIG recommends that CFSA track the training activities of DCPS and Charter School employees. The OIG responds that this was not the intent of the finding or recommendations. The OIG proposes that such information be reported to CFSA so that CFSA is aware that school-based mandated reporters have been trained on their legal responsibilities as mandated reporters and the child abuse and neglect investigative process.

In lines 30 through 35 of CFSA's response, CFSA misrepresents the nature of the OIG's finding. CFSA writes, "In reference to supervision not being conducted mentioned on page 3 of this report...;" however, the OIG's finding reports that the occurrence and documentation of supervision are inconsistent, which has a different connotation. Furthermore, finding three of the report reflects that both formal and informal supervision occurred. The OIG stands by its finding and recommendations as stated.

The OIG acknowledges CFSA's response in lines 37 through 55 and notes that the referenced information and actions occurred subsequent to the OIG's July 2010 completion of fieldwork.

The OIG agrees with CFSA's response in lines 57 through 60, which identifies the District of Columbia as a named party to the *LaShawn* lawsuit rather than CFSA. All such references were corrected in the report.

The OIG acknowledges CFSA's response in lines 62 through 64 and notes that the referenced information and actions occurred subsequent to the OIG's July 2010 completion of fieldwork.

The OIG acknowledges CFSA's response in lines 69 through 71 and agrees that the data referenced was obtained through interviews rather than compiled from the FACES system.

The OIG acknowledges CFSA's response in lines 73 through 78 clarifying the role of Out of Home social workers and private agencies during a child's removal from their parental home. The OIG notes that its comments regarding CPS supervisors' assistance with visits and medical appointments subsequent to the RIF is consistent with CFSA's response that such assistance occurred during a specific time period.

The OIG acknowledges CFSA's response in lines 79 through 81 and agrees that the data referenced was obtained through interviews rather than compiled from the FACES system.

KEY FINDINGS

The OIG agrees with CFSA's response in lines 88 to 91 regarding social workers duties and responsibilities at the end of an investigation and added this information in the report.

The OIG acknowledges CFSA's points of clarification in lines 93 through 104 regarding the use of "intensive" rather than "severe" when referencing a higher level of risk associated with a family; the implementation of safety plans to ensure a safe environment; and transfer of case responsibility when a child is removed from the parental home.

The OIG acknowledges CFSA's response in lines 117 through 119 and notes that the referenced information and actions occurred subsequent to the OIG's July 2010 completion of fieldwork.

2. Some mandated reporters within D.C. schools do not understand their legal obligations or the legal obligations of CPS social workers during investigations.

Background: The D.C. Council passed legislation in 2007 to give the Mayor direct authority over the public school system and to transfer the oversight responsibility for the charter schools from the Board of Education to the PCSB. The PCSB became the sole authorizing entity for charter schools in the District of Columbia.⁵⁸ Also in 2007, the Mayor appointed a Chancellor to manage DCPS.⁵⁹

According to the Child Welfare Information Gateway,⁶⁰ "the first area of defense against the problem of child maltreatment is one of awareness. Each individual who is involved with children has the obligation of knowing the basics of how to protect children from harm."⁶¹ According to a 2007 Child Maltreatment report issued by the U.S. Department of Health and Human Services, Administration on Children, Youth and Families, educational personnel comprised the third largest group of individuals reporting allegations of child abuse and neglect in D.C. during 2007.⁶² Figure 3, on the following page, summarizes the sources for child abuse/neglect reports in the District of Columbia for 2007.⁶³ Some District agencies and

⁵⁸ "The PCSB regularly evaluates D.C. public charter schools for academic results, compliance with applicable local and federal laws and fiscal management, and holds them accountable for results. The PCSB can close charter schools that fail to meet the goals established in the charter agreement between the PCSB and the school." <http://www.dcpubliccharter.com/About-the-Board.aspx> (last visited Apr. 27, 2010).

⁵⁹ See <http://www.dcwatch.com/mayor/0170612.htm> (last visited July 27, 2010).

⁶⁰ The Child Welfare Information Gateway is a service of the U.S. Department of Health and Human Services, Administration on Children and Families and provides access to information on topics including child welfare, abuse, and neglect. See <http://www.childwelfare.gov/> (last visited June 24, 2010).

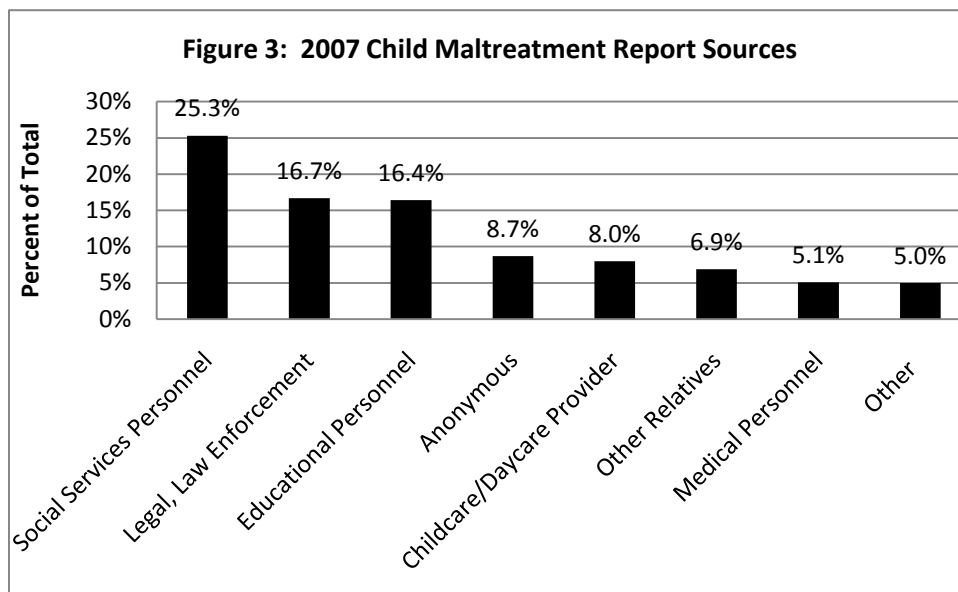
⁶¹ <http://www.childwelfare.gov/pubs/usermanuals/educator/educatora.cfm> (last visited Mar. 3, 2010).

⁶² U.S. Department of Health and Human Services, Administration on Children, Youth and Families. *Child Maltreatment 2007: Report Sources, 2007*, available at http://www.act.hhs.gov/programs/cb/pubs/cm07/table2_2.htm.

⁶³ The U.S. Department of Health and Human Services figures are based on a total number of 4,506 reports. Report source statistics for foster care providers, medical health personnel, alleged perpetrator(s), alleged victim(s), friends or neighbors, and parents were included in the U.S. Department of Health and Human Services report but not cited here because they individually accounted for less than five percent of report sources.

KEY FINDINGS

departments, such as the Office of the State Superintendent of Education and the Deputy Mayor for Education, have implemented annual mandated reporter training requirements for employees.



CFSA's Office of Training Services Administration (OTS) provides instructor-led mandated reporter training to District entities upon request. In February 2009 CFSA developed a free online training course for mandated reporters.⁶⁴ Upon completion of training, mandated reporters should be able to:

- understand their legal obligations as a mandated reporter;
- define the types of child abuse and neglect;
- recognize signs of child abuse and neglect;
- identify groups of children who may be at a higher risk for abuse or neglect;
- learn how to respond to a child who discloses abuse or neglect;
- know how to prepare for and make a report of child abuse/neglect; and
- understand the process that occurs after a report is made.⁶⁵

Criteria: D.C. Code § 4-1321.02(a) states that any person:

⁶⁴ The online course is available to both D.C. government employees and the general public. See <http://cfsa.dc.gov/DC/CFSA/CFSA+News+and+Opportunities/Online+Mandated+Reporter+Training> (last visited Nov. 2, 2010).

⁶⁵ OTS also instructs individuals on how to train mandated reporters. CFSA has trained employees within the Collaboratives and 16 private agencies on providing mandated reporter training.

KEY FINDINGS

who knows or has reasonable cause to suspect that a child known to him or her in his or her professional or official capacity has been or is in immediate danger of being a mentally or physically abused or neglected child, as defined in § 16-2301(9), shall immediately report or have a report made^[66] of such knowledge or suspicion to either the Metropolitan Police Department of the District of Columbia or the Child and Family Services Agency.

D.C. Code § 4-1321.02(d) further states that:

any health professional licensed pursuant to Chapter 12 of Title 3 [Health Occupations Boards], or a law enforcement officer, humane officer of any agency charged with the enforcement of animal cruelty laws ... shall report immediately, in writing, to the [CFSA], that the law enforcement officer or health professional has reasonable cause to believe that a child is abused as a result of inadequate care, control, or subsistence in the home environment due to exposure to drug-related activity.

Individuals required by law to report known or suspected incidents of child abuse and neglect are considered mandated reporters, and D.C. Code §§ 4-1321.02(b) and (d) identify professions with members who are considered as such. This listing includes school employees, such as school officials, teachers, athletic coaches, and day care workers.

In April 2009, the OIG issued a report recommending that DCPS and the PCSB ensure that all mandated reporters under their employ receive annual training regarding how to detect abuse and neglect, and that DCPS and the PCSB develop uniform policies and procedures for reporting cases of abuse and neglect. In March 2010, the OIG received responses to this recommendation. The Executive Office of the Mayor (EOM) stated that a policy for reporting suspected cases of abuse or neglect had been developed in 2001, and DCPS would review this policy for possible revisions, including clear procedures. Additionally, the EOM stated that DCPS would require that principals ensure that all teachers and school employees take CFSA's online mandated reporter training, at a minimum. PCSB responded to the OIG's recommendation as follows:

Initial training provision is the responsibility of other citywide agencies (i.e., CFSA, [Child Support Services Division], etc.).

⁶⁶ D.C. Code § 4-1321.02(b) states:

Whenever a person is required to report in his or her capacity as a member of the staff of a hospital, school, social agency, or similar institution, he or she shall immediately notify the person in charge of the institution or his or her designated agent who shall then be required to make the report. The fact that such a notification has been made does not relieve the person who was originally required to report from his or her duty under subsection (a) of this section of having a report made promptly to the Metropolitan Police Department of the District of Columbia or the Child and Family Services Agency.

KEY FINDINGS

Once school leaders, counselors, social workers and/or [Student Support Team] team members have been trained, they can then provide training to all potential mandated reporters at the site-level. The PCSB's role would be to assist in facilitating said training opportunities and collaboratively enforce the law.⁶⁷

Condition: Several CPS interviewees recounted instances when school employees:

- waited until the end of the school day to report allegations of abuse and neglect rather than make a report when they first observed signs of child maltreatment;
- did not retain a child on school premises until a CPS social worker arrived to interview the child;
- impeded CPS social workers from meeting with children;
- did not make reports to CPS timely;
- filed reports of educational neglect without verifying the number of unexcused absences or contacting parents and caregivers to inform them that their child had exceeded the allowable number of unexcused absences; and
- reported incidents that did not meet the criteria for child abuse or neglect.

CPS employees also stated that some school employees are not knowledgeable of the investigative process and are sometimes uncooperative during investigations. CPS social workers stated that: upon arrival at some schools, they were initially denied access to seeing a child; did not receive much assistance with locating children for interviews; were told that they could not interview a child unless a school employee was present; or were informed that the child's parents/caregiver had been notified of the CPS social worker's interview with the child. Such acts may impede the investigation process.

CFSA employees also stated that the above-mentioned problems occurred more frequently within D.C. public charter schools than in D.C. public schools. For example, according to a CFSA senior official, when charter school employees do not allow social workers to interview a child on school premises, the CPS social worker will contact the CFSA General Counsel, who will then contact the PCSB's senior staff so that the social worker can interview the child.

Cause: According to a DCPS official, a method for tracking whether employees received online mandated reporter training had not been established. This official also stated that principals within individual schools do not track compliance. The inspection team contacted the PCSB to determine whether annual mandated reporter training had been provided. A PCSB

⁶⁷ Memorandum from Neil O. Albert, City Administrator to Charles J. Willoughby, Inspector General (Mar. 5, 2010).

KEY FINDINGS

official reported that the PCSB had not required public charter school employees to obtain this training nor did he/she know whether any efforts had been taken within individual schools to require that staff obtain mandated reporter training.

In addition to public and charter schools' failure to ensure receipt of mandated reporter training, CPS employees stated that school employees sometimes contact CFSA with allegations that do not meet the criteria for abuse or neglect because they do not want an area of potential concern to go unreported and then escalate into something serious such as a child fatality. According to CPS employees, this fear stems from a recent high-profile child fatality case involving CFSA.⁶⁸

Effect: If mandated reporters do not receive periodic training, they may not recognize signs of abuse or neglect, and they may not be aware of their legal obligations to report suspicions of abuse and neglect. In addition, children may remain in perilous situations if abuse and neglect are not reported, and their safety may be at risk. Likewise, when school personnel insist that an employee is present during a social worker's interviews, they may infringe on the investigative process and children may be less inclined to disclose details of abuse or neglect.

Accountability: Mandated reporters are required by law to report knowledge or suspicion of child abuse and neglect. However, neither the D.C. Code nor licensure requirements require teachers to obtain mandated reporter training. The PCSB has oversight of charter schools but, absent legislation, cannot impose requirements upon these independently run schools. DCPS officials stated they would require that principals ensure that all teachers and school employees take CFSA's online mandated reporter training, but as of May 2010 DCPS had not instituted this plan.

Recommendations:

- (1) That the PCSB Chair and DCPS Chancellor disseminate information to schools under their respective purview informing them of mandated reporter training resources available within the District of Columbia, such as training provided by CFSA.

Agree	<u>X(PCSB)</u>	Disagree	<u>X(DCPS)</u>
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DCPS's and PCSB's March 2011 Responses, as Received:

PCSB agrees to the recommendation.

DCPS disagrees with the statement that we have not disseminated information to schools under our purview informing them that mandated reporter training resources are available within the District of Columbia, such as training provided by CFSA. Specifically, during SY 09/10 and SY 10/11, CFSA representatives delivered mandated reporter training to school base

⁶⁸ In April 2007, a school social worker reported a case of educational neglect to CPS involving a woman and her daughter. CPS's attempts to see the daughter were unsuccessful. During the following year, the woman was found living in a row-house with the bodies of her four daughters. She was eventually convicted of their murders.

KEY FINDINGS

personnel during new teacher orientations, during SY 09/10, CFSA representatives briefed DCPS principals about the online mandated reporter training, during SY 10/11, DCPS implemented Mandated Reporter and EEO trainings with instructions to all DCPS employees. Newly hired DCPS employees are provided with information about the mandated reporter training and the employee's obligation to report. DCPS has also disseminated to principals via the Principal Portal and the Educator Portal a link to the mandated report training.

OIG Response: **DCPS's response appears to meet the intent of this recommendation.**

- (2) That the PCSB Chair recommend to all charter schools that mandated reporters receive annual training on their legal obligations and the investigative process that occurs after a report of child abuse and/or neglect is filed and establish this requirement in employee performance plans.

Agree _____ Disagree X

PCSB's March 2011 Response, as Received:

PCSB states, pursuant to the School Reform Act, D.C. public charter schools exercise exclusive control over their administration and personnel. Pursuant to the PCSB's duty to ensure public charter schools comply with applicable law, PCSB agrees to disseminate information pursuant to Recommendation (1).

OIG Response: **The OIG stands by its recommendation and believes it falls within PCSB's stated role "to facilitate ... training opportunities and collaboratively enforce the law."**

- (3) That the PCSB Chair recommend that all charter schools implement a monitoring system that tracks mandated reporters' receipt of training and provide compliance reports to the PCSB Chair annually.

Agree _____ Disagree X

PCSB's March 2011 Response, as Received:

PCSB states, pursuant to the School Reform Act, D.C. public charter schools exercise exclusive control over their administration and personnel. Pursuant to the PCSB's duty to ensure public charter schools comply with applicable law, PCSB agrees to disseminate information pursuant to Recommendation (1).

OIG Response: **The OIG stands by its recommendation and believes it falls within PCSB's stated role "to facilitate ... training opportunities and collaboratively enforce the law"**

- (4) That the PCSB Chair provide mandated reporter training compliance reports to the City Administrator and D/CFSA annually.

Agree _____ Disagree X

KEY FINDINGS

PCSB's March 2011 Response, as Received:

PCSB states, pursuant to the School Reform Act, D.C. public charter schools exercise exclusive control over their administration and personnel. Pursuant to the PCSB's duty to ensure public charter schools comply with applicable law, PCSB agrees to disseminate information pursuant to Recommendation (1).

OIG Response: The OIG stands by its recommendation and believes it falls within PCSB's stated role "to facilitate ... training opportunities and collaboratively enforce the law"

- (5) That the DCPS Chancellor require that employees considered mandated reporters receive annual training on their legal obligations and the investigative process that occurs after a report of child abuse and/or neglect is filed and establish this requirement in employee performance plans.

Agree **X** Disagree

DCPS's March 2011 Response, as Received:

DCPS agrees that mandated reporter training should be delivered to employees considered mandated reporters on a more frequent basis. DCPS will collaborate internally and with CFSA to develop an effective way to deliver this training annually. DCPS will work to collaborate with CFSA to determine the appropriate training modules for the annual to meet the annual training requirement. DCPS disagrees with the recommendation that mandated reporter training should be tied to employee performance plans given the implications and impact associated with DCPS employees (i.e. teachers, principals and assistant principals) who are members of unions (Washington Teacher's Union and the Council of School Officers).

OIG Response: DCPS's response appears to meet the intent of this recommendation.

- (6) That the DCPS Chancellor implement a monitoring system that tracks mandated reporters' compliance with training requirements and provide compliance reports to the City Administrator and D/CFSA annually.

Agree **X** Disagree

DCPS's March 2011 Response, as Received:

DCPS agrees that a monitoring system to track mandate reporter compliance is needed. DCPS will continue working internally and with CFSA to develop an effective way to drastically improve the current DCPS tracking system. Given the importance of this initiative and the fact that responsibility of protecting the District's children lies with multiple agencies, DCPS would ask CFSA to take the lead in establishing an interagency working group with representatives

KEY FINDINGS

from the various agencies working together to develop a unified and consist approach to reporting information to the City Administrator in the future.

Errors and Inconsistencies found by CFSA in the Report

In reference to requiring PCSB's General Counsel to be contacted to proceed with an investigation as listed on page 29 [35] of this report, CFSA states and responds that PCSB does not have a General Counsel and that this incident may have involved a specific General Counsel for a specific Charter School.

3. Employees report that the occurrence and documentation of supervision are inconsistent.

Criteria: According to the American Board of Examiners in Clinical Social Work, “[c]linical supervision is conducted by an experienced and skilled clinical social worker in order to assist a less-advanced practitioner to form a clinical social work identity, and to develop the knowledge and skills to be able to practice effectively.”⁶⁹ Furthermore, clinical supervision addresses four domains:

- direct practice - the supervisor educates the social worker in assessment, treatment/intervention, identification and resolution of ethical issues, and evaluation of client interventions;
- treatment-team collaboration - social workers are educated on client-oriented activities and interacting with other professionals in the service environment;
- continued learning - supervisors help social workers develop skills required for life-long professional learning; and
- job management - social workers learn how to handle work-related issues such as record-keeping, fees, handling of telephone calls and missed sessions, timeliness, report-writing, caseload management, and resolution of ethical issues.⁷⁰

The National Association of Social Workers (NASW)⁷¹ states: “Supervision generally has two major objectives. The first is case management, which includes understanding of the patient in

⁶⁹ AMERICAN BOARD OF EXAMINERS IN CLINICAL SOCIAL WORK, CLINICAL SUPERVISION: A PRACTICE SPECIALTY OF CLINICAL SOCIAL WORK 3 (Oct. 2004).

⁷⁰ *Id.*

⁷¹ “NASW’s primary functions include promoting the professional development of its members, establishing and maintaining professional standards of practice, advancing sound social policies, and providing services that protect its members and enhance their professional status.” <https://www.socialworkers.org/nasw/history.asp> (last visited Feb. 22, 2010).

KEY FINDINGS

her or his situation and planning strategies for intervention. The second objective is to develop the knowledge and skills of the worker.”⁷²

CFSA’s Investigations policy and Administrative Issuance (CFSA-09-15) entitled “Supervision of Investigations” require weekly supervision with each social worker. The Administrative Issuance also requires annotated program and supervision notes to be entered in FACES after each supervision meeting. According to page two of this issuance:

The following (at a minimum) shall be reviewed, and additional direction provided if necessary:

- a. interviews of victims and other children[;]
- b. interviews of perpetrators[;]
- c. interview with reporting source[;]
- d. diligent search request and results[;]
- e. records request and results[;]
- f. evaluations[;]
- g. safety of the child[;]
- h. family risk[;]
- i. appropriate service levels[;]
- j. progress of investigation and report (who, what, when, where, why, and how)[; and]
- k. appropriate disposition[.]

Program managers must provide one-on-one weekly supervision for all supervisory social workers.

Condition: Several employees reported that social workers do not receive formal clinical supervision, and they do not meet each week with their supervisor as required by CFSA policy. A social worker stated that when supervisory sessions are held, the primary focus is on preventing investigations from going into backlog rather than providing clinical supervision. This social worker said that preventing backlogs unintentionally becomes the focus of these sessions because of pressure from management to meet the 30-day case closure timeframe.

One social worker stated a preference for more supervision to prepare for the licensed clinical social worker exam.⁷³ Doing so would allow for training in therapeutic skills, which is a component of the exam. Social workers also stated that during supervisory sessions, they should discuss topics such as social work theories and techniques, engaging clients, employee individualized plans for professional development, specific achievement milestones, and performance areas that need improvement.

⁷² *Supervision and the Clinical Social Worker*, CLINICAL SOCIAL WORK PRACTICE UPDATE (National Association of Social Workers, Wash., D.C.), June 2003, at 3.

⁷³ Title 17 DCMR § 7006.3(a) requires that “[a]n applicant for a license as an independent social worker or independent clinical social worker shall submit ... [p]roof satisfactory to the Board that: (1) [t]he applicant has completed the applicable supervised practice requirements of the Act under the supervision of a qualified supervisor ... [and] (2) [a]t least one hundred (100) hours of the applicant’s three thousand (3000) hours of supervised practice was completed under the immediate face-to-face supervision of a qualified supervisor”

KEY FINDINGS

Although social workers reported that they do not consistently receive formal clinical supervision, all of the social workers interviewed stated that they routinely have informal supervisory sessions. During informal sessions, social workers obtain feedback on how to proceed with the next step of an investigation and discuss any questions or concerns. Social workers also noted that supervisors provide formal supervisory meetings upon request.

When asked whether documentation of formal or informal supervision is recorded in FACES, as required by CFSA policy, responses from interviewed supervisors varied. One supervisor records supervision notes in FACES. Another replied that he/she maintains notes on supervisory sessions in a notebook and tries to email social workers a summary of what was discussed rather than documenting the discussion in FACES. CSSP found improvement in documentation of supervision in its 2010 Case Review, but only 38 percent of sampled investigations contained FACES documentation of supervisory/managerial consultation, directives, or decisions. Interactions between supervisors and social workers were accepted if “[e]vidence of supervisory involvement included documentation by both the investigator and the supervisor of case consultation, supervisory instructions documented in FACES of follow-up activities, and consultation at the time of investigation assignment of activities required based on allegations.”⁷⁴

Cause: Supervisors and social workers stated that the demands of casework prevent weekly meetings from occurring. One supervisor stated: “I am always available to my social workers, and I try to meet with them each week for 1 hour. However, this does not always occur on a regular basis because of the [urgent] nature of referrals.” For example, social workers may need to respond to an Immediate or meet with a collateral contact for an investigation rather than attend a scheduled weekly supervisory session.

Effect: The U.S. Department of Health and Human Services writes:

Because of the crisis nature of CPS, there also may be unscheduled “off-the-cuff” sessions. There are disadvantages to relying too heavily on this unscheduled approach. First, because these types of meetings take time away from scheduled activities, they are often hurried and harried. Second, because they come up suddenly, there is no time for preparation. Third, decisions may be made without sufficient time to consider alternatives carefully. Fourth, if a supervisor uses this method as a primary means for supervision, the same cases tend to be discussed continuously while others tend to “fall through the cracks.”⁷⁵

⁷⁴ CENTER FOR THE STUDY OF SOCIAL POLICY, AN ASSESSMENT OF THE QUALITY OF CHILD ABUSE AND NEGLECT INVESTIGATIVE PRACTICES IN THE DISTRICT OF COLUMBIA 43 (May 24, 2010).

⁷⁵ DIANE DEPANFILIS, MARSHA K. SALUS, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION ON CHILDREN, YOUTH AND FAMILIES CHILDREN’S BUREAU, OFFICE ON CHILD ABUSE AND NEGLECT, CHILD PROTECTIVE SERVICES: A GUIDE FOR CASEWORKERS, 62 (2003).

KEY FINDINGS

Some social workers who have been employed with CFSA for several years stated that newer social workers particularly would benefit from weekly supervision because adjusting to the job of CPS investigator can be challenging. According to the U.S. Department of Health and Human Services Administration for Children and Families:

Clinical supervision is vital to reinforce what is covered in formal training as well as to provide guidance to caseworkers in gathering assessment information, using it to develop service plans, as well as interpreting ongoing assessment information at key decision points.⁷⁶

Consistently providing clinical supervision can have a long-term positive impact on the quality of investigations. If this guidance is not provided, it may negatively impact new employees' experiences with the agency and increase turnover rates.

When supervisors neither provide nor document supervision and instruction given to social workers, they could be held liable for adverse outcomes that result if a social worker does not appropriately handle the investigation or follow through with the supervisor's instructions. NASW writes:

Although supervisors do not offer direct services to patients, they do indirectly affect the level of service offered through their impact on the supervisee. They share the responsibility for services provided to the patient and can be held liable for negligent or inadequate supervision related to negligent conduct by the supervisee.⁷⁷

Supervisory social workers could be subject to disciplinary action if unable to document that instructions were given to a social worker that could have prevented an adverse situation.

Accountability: Supervisory social workers are responsible for conducting and documenting weekly supervision of employees in FACES. Program managers must conduct weekly reviews of unit data and meet with supervisory social workers.

Recommendation:

That the D/CFSA ensure that program managers, supervisory social workers, and social workers allocate adequate time for formal supervision as required in CFSA's Investigations Policy and that documentation of meetings is recorded in FACES.

Agree _____ Disagree X

CFSA's March 2011 Response, as Received:

⁷⁶ [Http://www.acf.hhs.gov/programs/cb/pubs/family_assessment/fa5.htm](http://www.acf.hhs.gov/programs/cb/pubs/family_assessment/fa5.htm) (last visited July 28, 2010).

⁷⁷ *Supervision and the Clinical Social Worker*, CLINICAL SOCIAL WORK PRACTICE UPDATE (National Association of Social Workers, Wash., D.C.), June 2003, at 3.

KEY FINDINGS

CFSA states and responds that Program Managers and Program Administrators review data on a monthly basis, current workloads and other work duties do not permit Program Managers and Administrators to review the data weekly with Supervisors. However, documentation of supervision in the FACES system has been incorporated as a performance evaluation requirement for Supervisors, Program Managers and Program Administrators.

Errors and Inconsistencies found by CFSA in the Report

In reference to supervisory social workers and their duties as listed on page 34 [40] of this report, CFSA states and responds that it is in the process of developing a guide to assist supervisors in coaching and supervision skills.

In reference to supervision of social workers being documented in the FACES system as mentioned on page 34 [41] of this report, CFSA states and responds that documentation in the FACES system is reinforced by CFSA quality assurance strategies and performance evaluation requirements for supervisory social workers.

In reference to casework demands preventing weekly meetings from occurring as mentioned on page 35 [41] of this report, CFSA states and responds that supervision in CPS can occur in numerous situations whereby the supervisory social worker is providing direct support to the social worker (i.e, assisting with medical appointments, home visitations, sibling visitations and court hearings).

In reference to weekly meetings that must occur between Program Managers and Supervisory Social Workers as mentioned on page 36 [42] of this report, CFSA states and responds that numerous opportunities for CPS Supervisory Social Workers occur on a regular basis between supervisors and their staff. (i.e. initial assignment of investigation, removal and complaint form approvals, 18-day Reviews, identification of ancillary services, risk assessment approvals, investigation closure and case transfer staffing).

OIG Response: The OIG recognizes that providing formal weekly supervision may be impacted by the time-sensitive nature of CPS employees' duties and responsibilities. However, routine supervision is critical to quality case management and the development of competent social workers, especially those new to CFSA or to the social work profession. It is the responsibility of the D/CFSA to ensure that employees adhere to agency internal controls regarding employee supervision. The OIG stands by this finding and recommendation as written.

KEY FINDINGS

**Findings and
Recommendations:
ADDITIONAL FINDINGS**

ADDITIONAL FINDINGS

4. Referrals for investigation are accepted even though the criteria for abuse or neglect are not always met.

Criteria: The purpose of CFSA’s hotline is to review and screen reports of alleged and suspected abuse and/or neglect. When answering telephone calls, hotline workers use a screening tool containing a series of scripted questions to elicit information from the caller. Calls are either “screened out” or “screened in” depending on the nature of the call and the information reported. CFSA reports that a call is screened out when: “(1) [i]nformation doesn’t meet the legal definition of child maltreatment; (2) [d]uplicate referrals [are received] during the initial assessment; (3) [i]nsufficient information to locate the family [is provided]; (4) [n]o child under the age of 18 is involved; (5) [the involved party is n]ot a District of Columbia Resident; and ([6]) [a]dditional info or other.”

Calls are screened in when the information reported triggers an investigation of abuse or neglect. A report is accepted as a CPS referral for investigation if the following criteria are met:

- a. there is available, sufficient identifying information to locate the victim or the family;
- b. the information meets the definition of abuse or neglect;
- c. the victim is under the age of 18 years old (or 21 if the child is already under the care of CFSA);
- d. the incident(s) of child maltreatment occurred within the District of Columbia;
- e. the report is made in good faith; and
- f. the perpetrator is the child’s parent, guardian, or custodian.⁷⁸

Reports that meet the criteria of abuse or neglect are assigned to a CPS social worker for investigation. Calls that do not meet the criteria for an investigation and only request information and referrals are classified as an information and referral (I&R). Table 4 on the following page identifies the most common types of CPS and I&R reports. Once a call has been categorized as a CPS report or screened-out, a hotline supervisor reviews and approves it in FACES. Hotline supervisors must:

- review all hotline reports within their tour of duty;
- screen out inappropriate reports or screen in reports that may require a CPS response;
- approve reports of alleged child abuse, neglect, and I&Rs as appropriate;
- review, monitor, and assist with the decision-making process; and
- ensure timely assignment of emergency and non-emergency cases.

⁷⁸ See Procedure D of CFSA’s Hotline Policy (eff. June 24, 2009).

ADDITIONAL FINDINGS

Table 4: Types of Reports to the CFSA Hotline

Child Protective Services (CPS): (Triggers an investigation)	Information and Referral (I&R) (Triggers a referral)
<ul style="list-style-type: none"> • Child Fatalities or Critical Incident • Physical Abuse • Sexual Abuse • Domestic Violence • Inadequate Shelter • Physical Neglect • Educational Neglect • Medical Neglect • Left Alone • Caretaker is unwilling or unable to provide care • Substance Abuse • Institutional Abuse • A child is 13 or younger and he/she has 3 or more delinquency petitions 	<ul style="list-style-type: none"> • Physical or Sexual Assaults (non-intrafamilial) • Custody Issues • Child maltreatment occurring in another jurisdiction (courtesy interview) • Child Beyond Parental Control (PINS)^[79] • Juvenile Delinquency • Request for Services or Information • Protective Services (PS) Alerts (a request from another jurisdiction to locate a family) • Duplicate or multiple reports (Reports that duplicate previous reports with the same allegations are usually screened out. Multiple reports with new allegations are linked to active investigations. Note: I&Rs can be associated but not linked to a previous report.)

Source: CFSA Hotline Policy, Chapter: Child Protective Services (CPS), effective date June 24, 2009.

Condition: In FY 2007, CPS established a hotline screening panel to ensure that hotline employees properly categorize reports. CPS employees and a clinical director representing the Collaboratives participate in this daily review of hotline calls.⁸⁰ Although calls are reviewed by a hotline supervisor and the hotline screening panel prior to acceptance for investigation, several employees stated that there have been instances when hotline workers and the screening panel incorrectly classified calls as CPS referrals. These calls should have been categorized as I&Rs because they did not meet the criteria for abuse and neglect. Social workers provided the following examples:

- A child's father reported that the mother of his child is not using child support money properly. Although there is no report of abuse or neglect, this report was accepted for investigation. The social worker was expected to go to the child's house to check on the child's welfare and school

⁷⁹ Persons in Need of Supervision (PINS) cases involve children who refuse to comply with parental rules and guidelines, engage in criminal activity, or refuse to attend school.

⁸⁰ The hotline screening panel does not review reports classified as Immediates because investigation of these reports must be initiated within 2 hours of receipt of the report.

ADDITIONAL FINDINGS

attendance, and to meet with the other children in the household.

- A referral may lack information such as a home address, reporting source, or name of the child, yet the social worker is expected to conduct a full investigation despite the scarcity of information. (For example, a caller to the hotline may report that he/she observed a parent hit a child while standing outside. The only information that the caller has is a description of the involved parties and the location of the incident. There is no identifying information about the caretaker and child such as their names, home address, etc.)

Survey respondents also reported that the CPS screening process is not done well. Comments included:

- The screening process is flawed. There is very little weeding out of inappropriate referrals due to the fear that a child will be injured and the agency will be blamed. This causes the workers to investigate many families that have done nothing abusive or neglectful. The community frequently uses CPS to harass family members and neighbors, and to try to influence custody hearings, which could be fairly easily discerned at the hotline level if the hotline worker could probe more.
- [P]arents are calling for help and in turn getting allegations made against them (out of control children); we are taking reports regarding behaviors which should be re-routed to DMH—it is not a CPS issue[.]

A hotline employee stated that sometimes workers receive calls that are not clearly abuse or neglect, but they are still uncertain of whether the call should be downgraded to an I&R. In these instances, the cases are sent to the hotline screening panel as referrals, and they determine whether an investigation should be opened.

In 2008, a National Resource Center for Child Protective Services (NRCCPS) case review team evaluated 198 calls referred to the hotline from May 2007 – April 2008 and observed that CPS's rate for screening in cases was significantly higher than the national average. Approximately 90 percent (90.2%) of CPS reports were accepted for investigation, whereas the national average was 61.7 percent. In 2009, CFSA data showed that approximately 12 percent of calls received were screened out. As Table 5 on the following page indicates, the percentage of calls screened out declined in FY 2010.

ADDITIONAL FINDINGS

**Table 5: Number and Percentage of Hotline Calls Screened Out
Between October 2009 and June 2010**

Hotline Calls	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10
CPS Screened Out (#)	40	23	32	37	34	67	46	39	37
CPS Screened Out (%)	6.8%	4.3%	6.1%	5.9%	7.0%	8.4%	6.9%	5.5%	5.8%

Source: This information was provided by CFSA on July 28, 2010.

Cause: CPS employees stated that calls are screened in even though they may not meet the criteria for a CPS investigation because CFSA employees are fearful of a tragic outcome. Consequently, employees are hesitant to screen out cases that have risk factors for abuse and neglect but do not meet the criteria for such a classification. A CFSA senior manager stated:

If we receive a report that is ambiguous, and we believe there are concerns regarding the child's safety, we will classify the referral as an I&R and do a safety check on the child; this is not a full investigation. The purpose of the safety check is to see the child and determine whether he/she is in a safe environment.⁸¹

Effect: A social worker stated that accepting reports that do not warrant an investigation increases social workers' caseloads, which contributes to poor morale. CFSA is aware of the high percentages of cases that are screened in and is developing a differential response model that offers alternative assessment options for accepted reports. Differential response, also known as dual track or alternative response, is an approach that allows child welfare agencies to respond differently to reports that do not meet the criteria for abuse and neglect but still contain risk factors. A survey respondent wrote: "Too often I see referrals accepted based on 'what if's' instead of the facts that are in the referral, and we really don't have jurisdiction to investigate this family. CPS needs to do a better job of balancing privacy rights of families and child protection." A differential response system will allow CPS to consistently conduct a risk or safety assessment as needed, which involves a home visit with the child to ensure his/her safety and welfare. Such an approach will allow CPS to assess reports that have potential risk factors without launching an investigation of abuse or neglect. Parents and caregivers must agree to this process, however.

The differential response system will entail bringing together collateral resources such as school employees, Department of Health personnel, and the Collaboratives, to discuss with the family the supports that are needed. This differs from investigations because multiple resources are convened at the same time to discuss the families' needs. According to a CFSA senior manager, individual agencies that will participate in the differential response system are working on internal processes to support the collaborative efforts needed. During its FY 2010 -2011 performance oversight hearing, CFSA reported that it was collaborating with other District

⁸¹ Some employees reported that full investigations are conducted in these situations.

ADDITIONAL FINDINGS

agencies and anticipated launching the evidence-based best practice of Differential Response before the end of this fiscal year.

Accountability: The hotline supervisor and the hotline screening panel are responsible for ensuring that screening procedures are followed and hotline reports are properly categorized. Furthermore, CFSA's March 2011 response notes that a hotline quality assurance review is completed by the hotline worker, Supervisor, Program Manager and Program Administrator. The CFSA Director is responsible for ensuring that appropriate steps are taken toward timely implementation of a differential response system.

Recommendations:

- (1) That the D/CFSA ensure that employees adhere to policies and procedures for screening and classifying hotline reports.

Agree **X** Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds that it has developed and implemented several tools to assist staff in adherence of proper screening and classifying of hotline reports (i.e. revision and training on hotline policy, develop, train and implement a Hotline Practice Guide, Panel Review meetings and continued development of differential response).

- (2) That the D/CFSA continue to develop a differential response system that allows social workers to complete, on an as-needed basis, family safety assessments of reports that do not meet the criteria for abuse and neglect.

Agree **X** Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds that it plans on implementing a Differential Response system in July 2011.

Errors and Inconsistencies found by CFSA in the Report

In reference to Screened out reports classified as a I&R as mentioned on page 41 [47] of this report, CFSA states and responds that this statement is incorrect. The classification of an incoming hotline call as an I&R is completely separate from a Screened-in call and a Screened-out call. Screened-out calls are classified as screened out based upon: (1) Information doesn't meet the legal definition of child maltreatment; (2) Duplicate referrals during the initial assessment; (3) Insufficient information to locate the family; (4) No child under the age of 18; (5) Not a District of Columbia Resident; and (Additional info or other. Screened-in calls become an investigation of abuse or neglect. I&R calls only address information and referrals and is a separate classification.

ADDITIONAL FINDINGS

In reference to on-going accountability as mentioned on page 43 [51] of this report, CFSA states and responds that this “Accountability” section fails to mention that CPS has a hotline quality assurance review that is completed by the hotline worker, Supervisor, Program Manager and Program Administrator.

OIG Response: **The OIG modified the text of the final report of inspection to comport with CFSA’s correction regarding screened out calls and information and referrals.**

5. Pre-service training for new employees has improved, but a lack of funding has delayed implementation of an updated CPS-specific training curriculum.

Background: CFSA’s Office of Training Services Administration provides pre-service training to new employees. Pre-service training provides a foundation in CFSA operations and practice models and instructs new employees on how to perform their duties and responsibilities. In 2008, the Children's Bureau of the Administration for Children and Families (ACF)⁸² issued a Child and Family Services Review (CFSR) report for the District of Columbia.⁸³ When assessing CFSA’s training program, ACF noted that most stakeholders had a positive outlook on pre-service training, but the training program did not meet the needs of new CPS caseworkers assigned to the intake and investigations units. Specifically, the training program did not sufficiently detail how to interview children and how to obtain important information at the onset of an investigation.

According to the ACF report, some supervisors in the intake and investigations units had to re-train social workers after they had completed 4 months of pre-service training. During the inspection team’s interviews with CPS employees, they stated that in the past, new employees emerged from pre-service training without a full understanding of what to expect when working in CPS, and did not receive sufficient on-the-job training. Some supervisory social workers also reported that CPS social workers, especially those in the special abuse unit,⁸⁴ should receive forensic interview training.⁸⁵

ACF reported that CFSA managers were aware that the quality of CPS training needed improvement, and managers were “searching for an evidence-based curriculum that addressed

⁸² ACF is an administration within the U.S. Department of Health and Human Services. CFSRs are performance assessments of state child welfare agencies that evaluate achievement of positive outcomes for children and families. See <http://cfsa.dc.gov/DC/CFSA/Publication%20Content%20Instances/Performance/CFSR%202008.pdf> (last visited July 19, 2010).

⁸³ U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION OF CHILDREN, YOUTH AND FAMILIES CHILDREN’S BUREAU, FINAL REPORT DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES REVIEW (Jan. 2008).

⁸⁴ CPS’s special abuse unit handles sexual abuse, child fatality, and severe physical abuse allegations.

⁸⁵ The National Children’s Advocacy Center writes that the child forensic interview model is used when “questioning children who are suspected to be victims of sexual or physical abuse, as well as children who have witnessed violence perpetrated on another person.”

http://www.nationalcac.org/professionals/model/forensic_interview.html (last visited Dec. 2, 2009).

ADDITIONAL FINDINGS

the issues relevant to intake and investigations.”⁸⁶ The Court-Appointed Monitor’s 2010 Case Review reported that CFSA has cited on several occasions its plans to develop the training curricula and provide intensive specialized training for CPS staff. However, the Monitor commented that “this training has not occurred except in very piecemeal and limited ways.”⁸⁷

Criteria: The Child Welfare Information Gateway writes:

New staff should be fully oriented to their jobs and provided with the knowledge and skills needed to perform effectively. This requires competency-based preservice and inservice training that is tied to supervision; tailored to worker needs; and includes opportunities for experiential learning, shadowing, and coaching. When workers have the opportunity to build skills and improve their effectiveness, they are more likely to experience job satisfaction and stay committed to their work.⁸⁸

The *LaShawn* AIP also states at page 19 that CFSA must “develop [CPS] training curricula and provide training to address supervisory training needs as well as line worker training needs. Training will include forensic interviewing skill development for workers in the special abuse and institutional abuse units and documentation and critical thinking in child welfare assessment for all CPS workers.”

Condition: In its March 2011 response to the OIG report, CFSA reported that new CFSA social workers attend pre-service training that lasts 6 weeks. This training includes a combination of classroom and on-the-job training. The inspection team reviewed the training curriculum and met with CFSA managers to assess the status of pre-service training reforms. According to an OTS employee, a new three-tiered, pre-service training format was implemented in March 2010. Child welfare subject matter experts helped develop the program, and the NRCCPS reviewed the program and provided consultation during development.

Tier one of pre-service training provides instruction on the core principles of child welfare. After each core principle is taught, employees participate in applied professional training (a.k.a. on-the-job training) of that principle. According to an OTS employee, forensic interviewing would be added as a one-day course in May 2010 during tier one pre-service training. However, when responding to the OIG’s draft report of inspection, CFSA officials stated that forensic training was not added to the training curriculum. Tier two provides specialized training related to each social worker’s assigned CFSA division (e.g., CPS, adoptions, placement, etc.). Tier three consists of in-service training and employees have 1 year to complete 30 hours of this continuing education training.

⁸⁶ U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION OF CHILDREN, YOUTH AND FAMILIES CHILDREN’S BUREAU, FINAL REPORT DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES REVIEW 92 (Jan. 2008).

⁸⁷ *Id.* at 46.

⁸⁸ [Http://www.childwelfare.gov/management/training/curricula/caseworkers/core/index.cfm](http://www.childwelfare.gov/management/training/curricula/caseworkers/core/index.cfm) (last visited July 8, 2010).

ADDITIONAL FINDINGS

A CFSA manager reported that OTS is working with a contractor to develop an updated CPS-specific investigations training curriculum to be applied during tier two for new CPS employees. OTS initially anticipated testing a pilot of the new CPS investigations training curriculum in July 2010 and fully implementing it in September. However, as of June 2010, OTS had not received a draft of the training curriculum, and it appeared that meeting the July and September 2010 milestones would be delayed.

Cause: A CFSA manager stated that the contractor developing the CPS investigations curriculum also was providing CPS services under another contract for hotline training. CFSA identified a balance of \$4,000 in services that the contractor had not provided under the hotline training contract and requested that the balance be applied to the CPS investigations curriculum.⁸⁹ The contractor's budget for the completed investigations curriculum exceeded the \$4,000 balance from the hotline contract by \$10,000. Consequently, the contractor would not release the investigations curriculum materials to CFSA until payment is rendered.

The CFSA manager added that, as of June 2010, CFSA had not identified funding to pay the contractor for the CPS curriculum. The CFSA manager stated that a new Investigations Practice Guide was scheduled for completion and distribution in September 2010, and that the contractor should review this document to ensure that the CPS investigations training curriculum comports with Practice Guide tenets. Consequently, CFSA may not pay the contractor until FY 2011 to allow CFSA to use funding under the FY 2011 budget, while providing the contractor an opportunity to ensure that the curriculum is consistent with the Investigations Practice Guide.

Effect: Program managers and supervisors reported that they have seen a significant improvement in the quality of new employees assigned to CPS during the past year. It is important that funding is identified for implementation of the new investigations curriculum so that improvement continues. Without a strong CPS pre-service investigations curriculum, new CPS employees may find adjusting to their duties and responsibilities difficult and will be more dependent upon supervisors for additional training and instruction.

Accountability: The D/CFSA and OTS Administrator are responsible for ensuring that sufficient funding is allocated for the provision of training services to CFSA employees.

Recommendations:

- (1) That the D/CFSA ensure that sufficient funding is identified to obtain and implement a CPS-specific investigations curriculum during FY 2011.

Agree X Disagree _____

CFSA's March 2011 Response, as Received:

CFSA states and responds that the CPS-specific investigations are embedded in the administrative process and training for the Agency.

⁸⁹ CFSA did not allocate funds for the CPS investigations curriculum in its FY 2010 budget.

ADDITIONAL FINDINGS

- (2) That the D/CFSA establish and adhere to a definitive timeline for implementing the CPS-specific investigations curriculum once it is confirmed that it comports with the completed Investigations Practice Guide.⁹⁰

Agree X Disagree _____

CFSA's March 2011 Response, as Received:

CFSA states and responds that CPS managers and training staff have collaborated to further revise the pre-service curriculum and to ensure that it will be in alignment with the Investigations Practice Guide (The Investigations Practice Guide is in the process of being finalized).

Errors and Inconsistencies found by CFSA in the Report

In response to pre-service training requiring a 4 months time frame for completion as mentioned on page 44 [52] of this report, CFSA states and responds as a point of clarification pre-service training is only for six (6) weeks not four (4) months.

In response to training provided to social workers after core principles are taught as mentioned on page 45 [53] of this report, CFSA states and responds that it is contemplating whether to revise training so that CPS investigation assignments occur after completion of Tier II pre-service training.

In response to the statement of "Forensic Interviewing" being added as a one-day course during Tier I per-service training as mentioned on page 45 [53] of this report, CFSA states and responds that according to the course catalog of pre-service training, Forensic Interviewing was not added as a one day course during Tier I pre-service training. However, there was an "Interviewing Children" session added during Tier I pre-service training.

In response to CFSA not having a training curriculum by July 2010 as stated on page 48 [54] of this report, CFSA states and responds that training of social workers, Supervisors and Program Managers on the CPS Practice Guide will continually allow for specific training. Moreover, CPS staff receive additional training when they attend local and national conferences as required by their individualized annual development training plan.

OIG Response: At the time of the inspection, the OIG was informed that pre-service training lasts 4 months, and forensic interviewing would be added as a one-day course during pre-service training. However, the OIG modified the text of the final report of inspection to comport with CFSA's response regarding these two matters.

⁹⁰ CFSA inserted the following footnote at this point in the draft: "CFSA states and responds that upon completion, the CPS Practice Guide will provide additional guidance on policies, procedures and practices."

6. Program managers need additional support to oversee the midnight shift.

Criteria: CFSA’s Investigations Policy states that program managers must “develop and implement policies and procedures, review screened out and unfounded reports, review and transfer all substantiated cases, approve all removals conducted by the units, monitor supervisory decision-making, oversee staffing patterns, and provide weekly supervision for all supervisors.”⁹¹ According to the Families and Work Institute:⁹²

the more overworked employees are:

- [t]he more likely they are to make mistakes at work[;].
- [t]he more likely they are to feel angry at their employers for expecting them to do so much [; and]
- [t]he more likely they are to resent coworkers who [do not] work as hard as they do.⁹³

Condition: Because program managers must authorize certain social worker actions, such as the removal of a child from his/her home, a program manager is on duty during each CPS shift. Three program managers oversee nine day-shift units, and one program manager oversees the two evening-shift units. The midnight shift consists of two units, and each has one hotline worker and four social worker FTEs.⁹⁴ An FTE position has not been designated for a program manager to oversee the midnight shift, which operates from 11:00 p.m. to 9:30 a.m.

To ensure that a program manager is on duty during the midnight shift for consultation, the three day-shift program managers rotate “on-call duty” for the midnight shift. Consequently, every third week, a program manager works his/her normal shift from 8:15 a.m. to 4:45 p.m. and responds to calls from the midnight shift for 1 week while at home. CPS program managers cannot earn overtime or compensatory time while on-call because they are Management Supervisory Service employees.⁹⁵

During interviews, CPS program managers reported that following the 2008 child fatality case referred to earlier in this report, CPS was overwhelmed with the proliferation of hotline calls and investigations, and many investigations went into backlog. Consequently, CFSA administrators requested that program managers throughout CFSA assist by being on-call during the midnight shift. This rotation continued for approximately 6 to 8 months. CPS program managers were on call once every 3 months, rather than every 3 weeks, because all program

⁹¹ CFSA Investigations Policy, Chapter 1000, Procedure A “Roles and Responsibilities.”

⁹² “Families and Work Institute is a nonprofit center dedicated to providing research for living in today’s changing workplace, changing family and changing community.” <http://familiesandwork.org/site/about/main.html> (last visited July 20, 2010).

⁹³ FAMILIES AND WORK INSTITUTE, OVERWORK IN AMERICA: WHEN THE WAY WE WORK BECOMES TOO MUCH EXECUTIVE SUMMARY 2-3 (2004).

⁹⁴ Prior to CFSA’s RIF, SSAs were assigned to the midnight shift units.

⁹⁵ According to CFSA’s Human Resources Administration Issuance (HR-06-1) entitled “Overtime Pay and Compensatory (Comp) Time,” Management Supervisory Service, Excepted Service, and Executive Service employees are ineligible for overtime or compensatory time.

ADDITIONAL FINDINGS

managers had on-call duty. In July 2009, the caseload volume and backlog declined, and CPS reverted back to the original program manager rotation schedule.

Cause: A CPS senior manager stated that to his/her knowledge, an FTE had never been allocated for the midnight shift program manager position. However, this employee felt that such a position should be created.

Effect: A CFSA senior official stated that one of the limitations to this midnight shift management structure is that program managers may burn out. Program managers stated that being on-call is draining because they work their regular day shift and must be alert during the midnight shift to provide guidance and supervision as needed. In addition, a CPS senior manager stated:

By not having a designated [program manager, the midnight] shift receives inconsistent supervision and [staff cannot be properly guided and trained] . . . [S]ince the program manager is not physically present, [social workers] do not have immediate access to him or her. The day shift managers are also taxed by having to work their shift as well as receive calls overnight.

One program manager stated that he/she does not get any rest on some nights, and another program manager commented: “I was on call last night, for example, and only [slept for 4 or 5 hours] Receiving minimal sleep impacts my ability to stay on top of everything and remain functional.” The latter manager believes that CPS would be more efficient and effective with a midnight shift program manager. However, a CFSA senior official opined that the volume of activity during the midnight shift would not justify a permanent position.

A senior CPS employee stated that there was a period when program managers from other CFSA administrations were on-call during the midnight shift. However, CPS social workers did not always want to rely on them for assistance because they lacked expertise in CPS policies and operations. When social workers did obtain instruction from them, they sometimes called a CPS program manager or the CPS Administrator to confirm that they received appropriate guidance. Furthermore, a CPS employee reported that sometimes the program managers from the other administrations would not answer their cellular or home telephones when on-call.

Accountability: The CFSA Director is responsible for ensuring that optimal management structures are in place within CFSA administrations and the CPS Administrator is responsible for analyzing program operations and activities and providing feedback regarding needs, improvements, and accomplishments.

ADDITIONAL FINDINGS

Recommendation:

That the D/CFSA study the volume of activity during the midnight shift, assess the necessity for an onsite program manager during this shift, and determine appropriate next steps.

Agree X Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds that it will analyze and review the volume of activity on all after hour shifts to determine next steps and best practices. It must be noted, since the time of this audit an additional CPS Unit was added to address fluctuating volumes of hotline calls to CFSA.

Errors and Inconsistencies found by CFSA in the Report

In reference to the quantity of CPS Units as stated on page 47 [56] of this report, CFSA states and responds that CPS currently has three (3) Program Managers and 17 Units (1 Hotline Unit, 4 After hour Units (which includes 2 midnight units), 10 Day Shift Units and 2 Special Abuse Units).

In reference to how many workers are part of the midnight shift as listed on page 47 [56] of this report, CFSA states and responds for clarification purposes, SSA's were assigned to all CPS units not solely the after-hour units.

In response to the statement that when case volumes and the backlog declined that CPS reverted back to the original program manager rotation schedule as mentioned on page 48 [57] of this report, CFSA states and responds that the backlog numbers were reduced based upon the Together for Children (TFC) Project that was implemented by CFSA. The TFC Project was a cross departmental utilization of CFSA employees that focused on resolving backlog cases that exceeded 30 days.

7. Low morale and feelings of job insecurity contribute to turnover among CPS social workers.

Criteria: According to the American Public Human Services Association (APHSA),⁹⁶ CPS social workers had the highest average turnover rate, 22.1 percent, among social worker categories in 2003.⁹⁷ APHSA found that among the most severe problems that state administrators experience regarding preventable turnover of case-carrying child welfare staff:

⁹⁶ APHSA is a nonprofit, bipartisan organization of state and local human service agencies. Its mission is "to develop and promote policies and practices that improve the health and well-being of families, children, and adults." [Http://www.aphsa.org/Home/about.asp](http://www.aphsa.org/Home/about.asp) (last visited Sept. 21, 2010).

⁹⁷ "The overall focus of the survey was on **case-carrying child welfare workers**, which we defined as professional child welfare workers who carry cases and provide services directly to children and/or families, i.e., including case

ADDITIONAL FINDINGS

- Workloads [are] too high and/or demanding, e.g., stress, being overwhelmed,
- Caseloads are too high,
- After hours and unpredictable work interfere with personal and family life, ... [and]
- Workers do not feel valued by agency⁹⁸

Condition: According to CFSA, the turnover rate among CPS social workers was 20 percent and 21 percent respectively during FYs 2008 and 2009. Eleven of the 15 social workers who departed CPS in 2008 resigned from their position, and 12 of the 17 social workers who departed in 2009 resigned as well. CFSA senior managers stated that there was an aggressive campaign to hire CPS social workers in 2009 as a result of the vacancies. As of FY 2009, CPS reduced its overall vacancy rate to 2 percent. Although CFSA reported a minimal vacancy rate, when employees were asked in the employee survey how much longer they see themselves working at CPS, approximately one-third of respondents (34.1%) replied that they did not anticipate working at CPS for more than 1 additional year.

As mentioned above, at the time of the inspection, there was a vacancy in one of CPS's evening shifts and one midnight shift. Consequently, these units were operating with three social workers rather than four. Employees stated that in order to supplement the shifts' staffing level, management emails social workers from other shifts to see if they can work overtime to cover the shifts.

Cause: Interviewees and survey respondents stated that demanding caseloads, low morale, and feelings of job insecurity contributed to high turnover among CPS staff. Employees reported that morale within the agency has been low since the 2008 child fatality case. The ensuing termination of several CPS employees and negative media attention regarding CFSA's handling of the investigation also lowered morale. Reports of abuse and neglect increased following this case, which caused extremely high investigation caseloads for CPS social workers. Low morale and job insecurities remained, and the OIG inspection survey showed that 81.8 percent of respondents felt that morale within CPS was not positive.

In addition, interviewees felt that some of the employees who worked on the investigation involving the child fatalities were unjustly terminated. Employees stated that CPS operates in a state of fear, and if another investigation similar to the 2008 child fatality case occurred, employees would be terminated regardless of how well they performed intake and investigation processes.

Effect: An interviewee stated that social workers "burn out" from the job, which leads to high turnover in CPS. Consequently, although cases are distributed evenly among CPS units,

managers, but excluding paraprofessional staff." APHA, REPORT FROM THE 2004 CHILD WELFARE WORKFORCE SURVEY: STATE AGENCY FINDINGS 9 and 16 (Feb. 2005) (emphasis in original), *available at* <http://www.aphsa.org/Home/Doc/Workforce%20Report%202005.pdf> (last visited Sept. 21, 2010).

⁹⁸ *Id.* at 10 – 11.

when a unit loses an employee, the remaining social workers are in rotation for investigations more frequently, and their caseloads may exceed 12 investigations at a time. In addition, an employee noted that sometimes pregnant employees do not conduct fieldwork once they reach their sixth or seventh month of pregnancy, and it is not uncommon for other employees to take extended sick leave. Because social work is a high stress job, employees sometimes “call out” from their shift, and all of these factors limit the number of available social workers. Therefore, CPS organization charts and allocated number of FTEs do not accurately reflect day-to-day staffing levels.

[H]igh turnover rates and staffing shortages can affect children's safety and permanency by:

- Accountability:** The Deputy Director of Operations and CPS Administrator are responsible for maintaining sufficient staffing levels within CPS units, and the Human Resources Division is responsible for filling vacant positions timely.

That the D/CFSA assess underlying morale issues prompting employee turnover and implement incentives for improving retention.

⁹⁹ MARSHA K. SALUS, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION ON CHILDREN, YOUTH AND FAMILIES CHILDREN'S BUREAU, OFFICE ON CHILD ABUSE AND NEGLECT, SUPERVISING CHILD PROTECTIVE SERVICES CASEWORKERS 67 (2004).

CFSA, Child Protective Services Administration – April 2011

CFSA's March 2011 Response, as Received:

CFSA states and responds that the Human Resources (HR) staff is currently leading several initiatives to address employee morale and turnover throughout CFSA. HR recently conducted focus group sessions with a cross section of employees (including CPS) to better understand reasons for employee dissatisfaction and turnover. The data from the focus group has been shared with CFSA leadership to identify and implement initiatives to improve employee engagement. Additionally, HR recently implemented an "employee events" team to focus on developing and implementing social and recognition activities. Further, HR is undertaking additional employee recognition initiatives to be implemented in Fiscal Year 2011.

Errors and Inconsistencies found by CFSA in the Report

In response to the issue of filing vacancies within CFSA as mentioned on page 51 [60] of this report, CFSA states and responds that the Deputy Director of Program Operations, CPS Administrator and HR meet monthly to assess staffing needs to ensure appropriate staffing levels are maintained.

8. The average caseload per social worker metric masks social workers' caseloads that exceed the LaShawn requirement.

Criteria: NASW writes: "Administrators must ensure that social workers are assigned a manageable workload to ensure that clients have access to the worker and receive the services they need."¹⁰¹ The LaShawn AIP and best practices issued by the Child Welfare League of America (CWLA)¹⁰² state that a social worker's caseload should not exceed 12 investigations. This requirement is also included as one of CFSA's annual performance measures.

Condition: The average caseload per social worker report is generated by FACES. When this metric is calculated, the total number of open investigations is divided by the total number of CPS social workers assigned at least one investigation. Employees stated that the methodology for calculating this metric does not take into account disparities in caseloads among shifts. For example, day shift social workers receive more investigations than evening and midnight shift employees, and new employees who are in training have fewer cases. Supervisory social workers who are reviewing open investigations for closure may also be included in the calculation.

Day shift workers carry a full complement of investigations, whereas social workers in training or on the midnight shift typically carry two or three investigations.¹⁰³ Therefore, when

¹⁰¹ NASW STANDARDS FOR SOCIAL WORK PRACTICE IN CHILD WELFARE, Standard 7 (National Association of Social Workers 2005) at 32.

¹⁰² The CWLA is a coalition of private and public agencies that serve vulnerable children and families. Its mission is to "lead the nation in building public will to ensure safety, permanence, and well-being of children, youth, and their families by advancing public policy, defining and promoting practice excellence and delivering superior membership services." [Http://www.cwla.org/whowhat/mission.htm](http://www.cwla.org/whowhat/mission.htm) (last visited July 9, 2010).

¹⁰³ Midnight shift employees only carry investigations that resulted in a child's removal from the home and these investigations must be completed within 72 hours.

the average caseload per worker is calculated, social workers from other shifts or units who have low caseloads may skew the average caseload figure, and it appears that CFSA is in compliance with the *LaShawn* AIP. According to a CFSA senior manager, this is the best system at the moment for calculating the average caseload. Because averages are not good indicators of employee caseloads, CPS documents and reports to the Court Monitor the number of investigators who have caseloads in different ranges.

Effect: Using the current methodology for calculating average caseload may create the false appearance that CFSA’s complement of employees is sufficient to comply with *LaShawn* benchmarks. Consequently, CFSA may not be able to advocate for additional social worker FTEs because its performance metrics indicate that the existing complement of FTEs effectively manages caseloads of 12 or fewer investigations. Social workers are required to complete investigations within 30 days. If their caseload exceeds 12 investigations, children’s and families’ needs may not be properly identified and addressed, and the overall quality of investigations may be compromised.

Recommendations:

- Agree **X** Disagree

CFSA states and responds that the Intake and Investigation Caseload Count by Worker report (INV068), does produce an average caseload count based on the total number of open investigations divided by the number of workers with at least one open assignment to an investigation. The report summary breaks out the number of workers who have between: 1-4 investigations; 5-8 investigations; 9-12 investigations; 13-16 investigations; 17-20 investigations; 21-24 investigations; 25-28 investigations; 29-32 investigations; 33+

ADDITIONAL FINDINGS

investigations. The report provides the caseload details for every worker (i.e., the referral ID, referral name, etc.). It must be noted that CFSA does not measure the requirement by the average, nor does the Court Monitor. CFSA reports are based on the summary and details. To that end, CFSA agrees to the recommendation, but no further work is necessary as CFSA performs this function.

- (2) That the D/CFSA ensure that the new metric is used for performance measures and when reporting caseload data to stakeholders.

Agree _____ Disagree _____ **X**

CFSA's March 2011 Response, as Received:

CFSA states and responds that this recommendation is not needed as the reporting structure already exists to reflect individual caseloads.

- (3) That the D/CFSA, when possible, ensure that each social worker has an average of 12 or fewer investigations in accordance with LaShawn requirements.¹⁰⁴

Agree _____ Disagree _____ **X**

CFSA's March 2011 Response, as Received:

CFSA states and responds that this recommendation is not needed as the reporting structure already exists to reflect individual caseloads.

Errors and Inconsistencies found by CFSA in the Report

In response to the statement that average caseload per social worker report is generated by FACES as listed on page 52 [61] of this report, CFSA states and responds that the FACES report summary notes the number of investigators with caseloads in different ranges (i.e., 1-4 investigations; 5-8 investigations; 9-12 investigations; 13-16 investigations; 17-20 investigations; 21-24 investigations; 25-28 investigations; 29-32 investigations; 33+ investigations). The report also includes the average caseload count.

In reference to how OIG calculated the average caseload figure as listed in this report on page 52 [62] and throughout, CFSA states and responds that the appropriate metric to measure is not an average caseload figure. The metric of average caseload figure is not used by CFSA nor the Court Monitor to measure performance. The FACES system is programmed to accurately track an investigative worker's caseload. The OIG report is referring to an average and not the actual caseload for a worker. There is no specific designation in the FACES system as to what shift a CPS unit works. Moreover, this information is misleading as it places emphasis on the average as compliance with LaShawn mandates. However, this measurement used in the OIG report is not how performance is measure in LaShawn.

¹⁰⁴ The OIG recognizes that CPS is unable to control surges in CPS referrals.

OIG Response: At the time of this inspection, CFSA's performance measures for FYs 2008 through 2010 included the metric "average caseload per social worker." Furthermore, industry standards recommended that a social worker's caseload should not exceed 12 investigations. The OIG did not "calculate" the average caseload as stated in CFSA's response. Rather, the OIG attempted to determine CFSA's methodology for calculating average caseloads and establish whether CPS social workers met the industry standard. The OIG notes that current agency performance measures no longer use the terminology "average caseload per social worker" in its performance measures, and CFSA's response appears to meet the intent of this recommendation.

9. **Employees report limited healthcare safety items, child care necessities, and vehicles.**

a. *According to social workers and SSAs, healthcare safety items are not readily available.*

Criteria: NASW Standards for Social Work Practice in Child Welfare state: "Appropriate precautions should be taken to protect the social worker and the client from the spread of contagious or infectious diseases, especially in situations where the social worker is in contact with clients who have medical conditions that increase the risks associated with communicable diseases."¹⁰⁵

In March 2006, CFSA issued an Administrative Issuance entitled "Communicable Disease Containment and Prevention Protocols" that provides guidelines related to the transportation of clients who may have been exposed to a communicable disease, isolation of persons (clients and/or staff), and containment in the event of initial contact with a communicable disease. This Administrative Issuance also establishes "Universal Precautions," which CFSA described as guidelines to be followed to prevent the spread of infectious disease. These precautions include the use of frequent handwashing; clean, non-sterile gloves; and surgical masks.

This Administrative Issuance also states:

In the event that the social worker must transport the potentially infected client for medical attention, social workers are strongly advised to utilize the safety kits placed in each government vehicle by the Facilities Management Administration in order to reduce the risk of transmission to the social worker and others. Social workers shall not under any circumstance bring children with a potential communicable disease to any of the CFSA facilities^[106]

¹⁰⁵ NASW STANDARDS FOR SOCIAL WORK PRACTICE IN CHILD WELFARE, Standard 7 (National Association of Social Workers 2005) at 33.

¹⁰⁶ *Id.* at 2. The safety kits must include non sterile gloves, hand sanitizer, seat covers, surgical masks, plastic caps to prevent the spread of head lice or ringworm, and Lysol spray.

ADDITIONAL FINDINGS

Condition: Social workers and SSAs stated that they work with and transport children who have or are suspected of having communicable diseases such as chicken pox, Methicillin-resistant *Staphylococcus aureus* (MRSA),¹⁰⁷ scabies, impetigo, lice, and ring worm. Communicable diseases may spread from: 1) one infected person to another; 2) an animal to a human; or 3) some inanimate object (doorknobs, table tops, etc.) to an individual.¹⁰⁸ Most social workers stated that healthcare safety items, such as gloves and surgical masks, were not readily available for handling children with communicable diseases when onsite at CFSA or during home visits.

One social worker reported that he/she buys healthcare safety items because CFSA has not provided them. Another social worker stated that management provided gloves at one point, but after the supply was depleted, it was not replenished. This social worker was also told that first aid kits would be made accessible to employees, but he/she has not seen any onsite at CFSA. Consequently, this social worker uses first aid kits from Children's Hospital when possible.

Cause: During interviews, CPS employees were uncertain as to who was responsible for reordering healthcare safety items or whether funding had been allocated for their purchase. A CFSA senior manager reported that social workers can obtain items such as gloves and masks from the Healthy Horizons Assessment Center. The Assessment Center maintains a supply of these items because they may be required during medical assessments. This manager stated: "It appears to me that we need to do a better job of communicating to social workers how to obtain these resources."

Effect: When an employee is exposed to a communicable disease because healthcare safety items are not available, he/she may contract it and place colleagues and family members at risk. For example, one SSA stated that he/she contracted scabies from children. When employees become sick, they may have to stay home from work so that the disease is not spread to colleagues and, in some instances, their home environment may need to be decontaminated.

Accountability: Once supplies are diminished, social workers are responsible for informing supervisors and/or CFSA officials that additional supplies are needed. CPS managers must then communicate these needs to the Facilities Management Administration so that supplies can be replenished.

b. CFSA does not maintain an adequate supply of child care necessities onsite.

Criteria: Partners for Kids in Care (PKC) is a division of CFSA, staffed by two FTEs, that provides much needed items for foster children and at-risk families through donations from individuals, community groups, and businesses.¹⁰⁹ This division hosts drives for toiletry kits and

¹⁰⁷ According to the Centers for Disease Control and Prevention, MRSA is a type of staph bacteria that is resistant to certain antibiotics. Most MRSA infections are skin infections. More severe or potentially life-threatening MRSA infections occur most frequently among patients in healthcare settings. See <http://www.cdc.gov/mrsa/definition/index.html> (last visited Aug. 12, 2010).

¹⁰⁸ See <http://dhs.wisconsin.gov/communicable/Epidem.htm> (last visited June 2, 2010).

¹⁰⁹ See <http://cfsa.dc.gov/DC/CFSA/Support+the+Safety+Net/Reach+Out+to+a+Child+or+Family+in+Need> (last visited July 20, 2010).

ADDITIONAL FINDINGS

encourages citizens to donate new or gently-used items to CFSA's donation centers. PKC's repository of items is the initial point of contact for social workers to access items such as clothing, toiletries, luggage, and household goods. The division also maintains a resource directory identifying community-based organizations that supply items such as clothing and shoes to children in need. When social workers observe that families are in need of immediate resources such as furniture, food, clothing, and/or transportation, the social worker can issue farecards and vouchers to clients to use at grocery, furniture, and retail stores.¹¹⁰

Condition: Social workers reported that CFSA does not have an adequate supply of clothing and toiletry items onsite for children who are in their care. For example, when SSAs bring children to the agency because they are awaiting a health screening or foster care placement, items such as diapers, baby formula, and clothing are not readily available, especially during the midnight shift.

Social workers can submit a clothing voucher request for up to \$100 - \$120 per child depending on the child's age. However, it can take several days for voucher requests to be processed. A social worker stated that if it is the winter season and a child is not dressed appropriately for the weather, he/she will purchase the necessary items for the child using personal funds.

Social workers can obtain clothing and other items from PKC's donation center; however, some CPS employees reported that there is a limited variety of clothing sizes. An SSA stated that gift cards can be used to purchase items such as diapers and baby wipes, but CFSA should maintain a supply of those items onsite so that employees do not have to leave the children who are in their care at the agency while they go purchase the necessary items. Social workers indicated that CFSA used to maintain a supply of diapers, milk, and clothing onsite in prior years. However, this was during a time when it was more difficult to place children in foster homes, and children would occasionally spend the night at CFSA.¹¹¹

Cause: A PKC employee suggested that the number and amount of donations to CFSA have declined as a result of the economic recession that the District is experiencing. CFSA does not provide a budget for PKC to purchase child care supplies, so this division relies on donations and refers social workers to community-based organizations that may be able to supply certain items. With regard to baby formula and food, CFSA cannot maintain these items onsite because the agency does not have a food preparer's license.

A CFSA senior manager stated that when there is an immediate need for items such as diapers, formula, or food for children while they are onsite at CPS, the CPS Administrator has a purchase card that can be used to buy those supplies. This employee stated that it is possible that social workers are not communicating these needs to supervisors and program managers, and that CFSA may need to do a better job of communicating how social workers can obtain these resources.

¹¹⁰ CFSA purchases Washington Metropolitan Area Transit Authority (WMATA) farecards and gift cards from fast food and grocery stores in bulk. The agency acquires furniture for clients through a contract with a local furniture store.

¹¹¹ CFSA no longer allows children to stay overnight.

ADDITIONAL FINDINGS

Effect: Social workers and SSAs stated that when supplies are not available, they are purchased with personal funds because there is no expeditious process to obtain agency funds for essential items. A social worker reported that emergency situations occasionally occur, such as a child's removal from his/her home, and clothing cannot be retrieved because the home is boarded up. In instances like this, children may be placed in foster homes without providing clothing for the children to the foster parents. PKC maintains an inventory of clothing for instances when clothing cannot be obtained from the child's home. However, social workers commented that the variety of clothing offered is limited. One social worker stated that he/she purchases clothing in different sizes to maintain at his/her desk in case of an emergency.

Accountability: A CFSA senior official stated that the CPS Administrator can use a purchase card to obtain items such as food, diapers, and baby formula. This employee further stated: "It appears to me that we need to do a better job of communicating how to obtain these resources to social workers. Those concerns had not been communicated to me, [and] it is important that the social workers convey these needs to their supervisor and the program administrator. The [CPS] practice guide will help identify how social workers can access resources"

c. CPS's lack of vehicle availability impacts social workers' ability to see clients within required timeframes.

Criteria: CPS social workers must respond to Priority Level 1 referrals within 2 hours of receipt; Priority Level 2 referrals must be responded to within 24 hours of receipt. CFSA maintains a fleet of vehicles for official business use, of which 20 have been allotted to CPS. When requesting a vehicle, CPS employees complete a daily itinerary form indicating when they need the vehicle, and the duration and purpose of its use. This form is submitted for processing to a clerical assistant, who communicates with the Facilities Management Administration to determine which vehicles are available. The assistant then assigns a vehicle to the CPS social worker or SSA. CFSA also had a contract with Zipcar, a company that provides a car-sharing service. Under the Zipcar contract, CFSA employees may reserve cars at a fixed rate for several hours or for an entire day. Zipcars have allowed CFSA to supplement its fleet of vehicles.

Condition: When interviewees were asked what additional resources were needed to complete their job, the most frequent response was additional vehicles. Several survey respondents also stated that the availability and distribution of vehicles did not work well within CPS. During an interview with Fleet Management personnel in April 2010, the inspection team learned that of the 20 vehicles allotted to CPS, 13 were in rotation for CPS social workers operating out of CFSA's primary office. Four vehicles had been assigned to a division of CPS located offsite, two were undergoing repairs, and one had been out of service for 1 week because a CPS employee lost the keys. Consequently, 13 vehicles were available to accommodate approximately 55 social workers and SSAs who staff the day shift.

Lack of access to vehicles can impact response time and ability to meet with clients. The availability of vehicles, however, depends largely on the amount of activity during a given day. One employee stated that CPS has encountered situations when all the vehicles are reserved, and none are available for employees to meet with clients and respond to Immediates. Another

ADDITIONAL FINDINGS

employee recalled a time when nine vehicles were out of service at the same time. If a vehicle is not available when an Immediate comes in, then Facilities Management must determine if another CFSA administration has one available for CPS use.

Cause: A Facilities Management employee was surprised to hear that CPS employees stated a need for additional vehicles. According to this employee, CPS employees should not be experiencing any problems because vehicles can be redirected from other administrations to CPS as needed. One social worker stated that vehicles are frequently unavailable because employees request them around the same time, typically the early afternoon hours. In addition, CPS receives an influx of calls and reports during certain times of the day, such as at the end of the school day. Consequently, the demand for vehicles increases during these times.

Regarding Zipcar usage, a senior CFSA employee reported that agency use of Zipcars had been severely restricted because CFSA employees had abused their use of these vehicles. Within the first 6 months of FY 2010, CFSA had accrued a bill of \$185,000, which was the projected expense for the entire fiscal year.

After restricting the Zipcar usage, CFSA supplemented the agency fleet with 10 additional vehicles. Employees from all CFSA administrations have access to this fleet and can reserve them for specific periods of time. For example, these vehicles are used only on an emergency basis and for no more than 4 hours at a time. If an employee needs to use the vehicle in excess of 4 hours, then he/she must request a vehicle from his/her administration's fleet.

Effect: On occasion, social workers or SSAs who are in the field are contacted and may have to return to CFSA so that another employee can use the vehicle for a more urgent matter. This primarily happens when social workers need to respond to Immediates, or they have cases that will go into backlog if they do not complete an assignment immediately. Social workers stated that vehicles must be returned one to two times per week, and it affects CPS's relationship with customers and counterparts, such as MPD. Another employee stated:

We need additional cars I may not get access to a car until the afternoon, and at that point I run the risk of having to work overtime because I may not be done with the case by the end of my tour of duty. After the [child fatality] case occurred, a number of cars were made available to us for casework. Once the backlog declined, our fleet of cars declined as well. Now we have to pair up with another social worker to work around this car issue.

Accountability: The CPS Administrator, in conjunction with the Facilities Management Program Manager, must ensure that agency vehicles are available so that social workers are able to fulfill time-sensitive duties and responsibilities.

ADDITIONAL FINDINGS

Recommendations:

- (1) That the D/CFSA ensure that healthcare safety items are supplied and replenished, and that employees are knowledgeable of where and how to obtain them.

Agree X Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds that Facilities Management Administration (FMA) in conjunction with Risk Management has provided healthcare kits to employees when they have been requested. The Office of Risk Management has provided kits for Agency vehicles which include but are not limited to mask, rubber gloves, first aid kits, water, snacks, feminine products, flashlights and batteries. The Office of Risk Management has also ordered hand sanitizers and disinfectant wipes to be added into the kits. A review of current healthcare safety supplies will be conducted on a regular interval and units will be replenished as needed. Additional communication will be forwarded to employees notifying them of the process to secure healthcare supplies when needed.

- (2) That the D/CFSA ensure that basic child care necessities are made available to CPS employees through either PKC or the CPS Program Administrator, and that employees are knowledgeable of how to request and obtain these items.

Agree X Disagree

- (3) That the D/CFSA ensure that social workers are knowledgeable of resources within the community and strengthen partnerships with them in order to maintain adequate levels of child care supplies.

Agree X Disagree

- (4) That the D/CFSA assess the current allocation of vehicles to CPS and determine whether additional vehicles from other CFSA administrations can be transferred to augment CPS's fleet.

Agree X Disagree

CFSA's March 2011 Response, as Received:

CFSA states and responds the Facilities Management Administration (FMA) works diligently with CPS staff and fully understand their responsibility and time sensitive responses to children and families in need. FMA has recently updated the Agency fleet with new fuel efficient and more reliable vehicles. CPS has twenty (20) vehicles assigned solely for their administration. Additional fleet vehicles are available to CPS on an as needed basis. FMA will

ADDITIONAL FINDINGS

continue to work with CPS Managers to better utilize existing capacity and identify additional resources as needed.

Errors and Inconsistencies found by CFSA in the Report

In response to duties of SSA's as described on page 56 [66] of this report, CFSA states and responds that the SSA position no longer exists within CFSA and social workers and family support workers have access to child care necessities.

OIG Response: **CFSA's response appears to meet the intent of this recommendation.**

APPENDICES

APPENDICES

- Appendix 1: List of Findings and Recommendations
- Appendix 2: Abuse and Neglect Priority Level Responses
- Appendix 3: Flow Chart of Intake and Investigation Process
- Appendix 4: Summary of CSSP Assessment Reports

APPENDIX 1

LIST OF FINDINGS AND RECOMMENDATIONS

Key Findings

1. **Compliance with the 30-day investigation requirement is not consistently achieved and may compromise the quality of investigations.**
 - (1) That the D/CFSA conduct an internal study to determine a more feasible timeframe for completing investigations and provide the results to the D.C. Council, *LaShawn* Plaintiffs, and the United States District Court Judge.
 - (2) That the D.C. Council consider expanding CFSA's requirement for completing investigations to a new timeframe as agreed upon by the D/CFSA, Court-Appointed Monitor, *LaShawn* Plaintiffs, and the United States District Court Judge.
 - (3) That the D/CFSA update performance goals, policies and procedures, and performance standards when an expanded timeframe for investigations is agreed upon and implemented.
2. **Some mandated reporters within D.C. schools do not understand their legal obligations or the legal obligations of CPS social workers during investigations.**
 - (1) That the PCSB Chair and DCPS Chancellor disseminate information to schools under their respective purview informing them of mandated reporter training resources available within the District of Columbia, such as training provided by CFSA.
 - (2) That the PCSB Chair recommend to all charter schools that mandated reporters receive annual training on their legal obligations and the investigative process that occurs after a report of child abuse and/or neglect is filed and establish this requirement in employee performance plans.
 - (3) That the PCSB Chair recommend that all charter schools implement a monitoring system that tracks mandated reporters' receipt of training and provide compliance reports to the PCSB Chair annually.
 - (4) That the PCSB Chair provide mandated reporter training compliance reports to the City Administrator and D/CFSA annually.
 - (5) That the DCPS Chancellor require that employees considered mandated reporters receive annual training on their legal obligations and the investigative process that occurs after a report of child abuse and/or neglect is filed and establish this requirement in employee performance plans.

- (6) That the DCPS Chancellor implement a monitoring system that tracks mandated reporters' compliance with training requirements and provide compliance reports to the City Administrator and D/CFSA annually.

3. Employees report that the occurrence and documentation of supervision are inconsistent.

That the D/CFSA ensure that program managers, supervisory social workers, and social workers allocate adequate time for formal supervision as required in CFSA's Investigations Policy and that documentation of meetings is recorded in FACES.

Additional Findings

4. Referrals for investigation are accepted even though the criteria for abuse or neglect are not always met.

- (1) That the D/CFSA ensure that employees adhere to policies and procedures for screening and classifying hotline reports.
- (2) That the D/CFSA continue to develop a differential response system that allows social workers to complete, on an as-needed basis, family safety assessments of reports that do not meet the criteria for abuse and neglect.

5. Pre-service training for new employees has improved, but a lack of funding has delayed implementation of an updated CPS-specific training curriculum.

- (1) That the D/CFSA ensure that sufficient funding is identified to obtain and implement a CPS-specific investigations curriculum during FY 2011.
- (2) That the D/CFSA establish and adhere to a definitive timeline for implementing the CPS-specific investigations curriculum once it is confirmed that it comports with the completed Investigations Practice Guide.

6. Program managers need additional support to oversee the midnight shift.

That the D/CFSA study the volume of activity during the midnight shift, assess the necessity for an onsite program manager during this shift, and determine appropriate next steps.

7. Low morale and feelings of job insecurity contribute to turnover among CPS social workers.

That the D/CFSA assess underlying morale issues prompting employee turnover and implement incentives for improving retention.

8. **The average caseload per social worker metric masks social workers' caseloads that exceed the *LaShawn* requirement.**

- (1) That the D/CFSA establish a reporting function in FACES that allows the system to more accurately report of the average monthly caseload for individual social workers.
- (2) That the D/CFSA ensure that the new metric is used for performance measures and when reporting caseload data to stakeholders.
- (3) That the D/CFSA, when possible, ensure that each social worker has an average of 12 or fewer investigations in accordance with *LaShawn* requirements.

9. **Employees report limited healthcare safety items, child care necessities, and vehicles.**

- a. According to social workers, healthcare safety items are not readily available.*
- b. CFSA does not maintain an adequate supply of child care necessities onsite.*
- c. CPS's lack of vehicle availability impacts social workers' ability to see clients within required timeframes.*

- (1) That the D/CFSA ensure that healthcare safety items are supplied and replenished, and that employees are knowledgeable of where and how to obtain them.
- (2) That the D/CFSA ensure that basic child care necessities are made available to CPS employees through either Partners for Kids in Care or the CPS Program Administrator, and that employees are knowledgeable of how to request and obtain these items.
- (3) That the D/CFSA ensure that social workers are knowledgeable of resources within the community and strengthen partnerships with them in order to maintain adequate levels of child care supplies.
- (4) That the D/CFSA assess the current allocation of vehicles to CPS and determine whether additional vehicles from other CFSA administrations can be transferred to augment CPS's fleet.

APPENDIX 2

APPENDICES

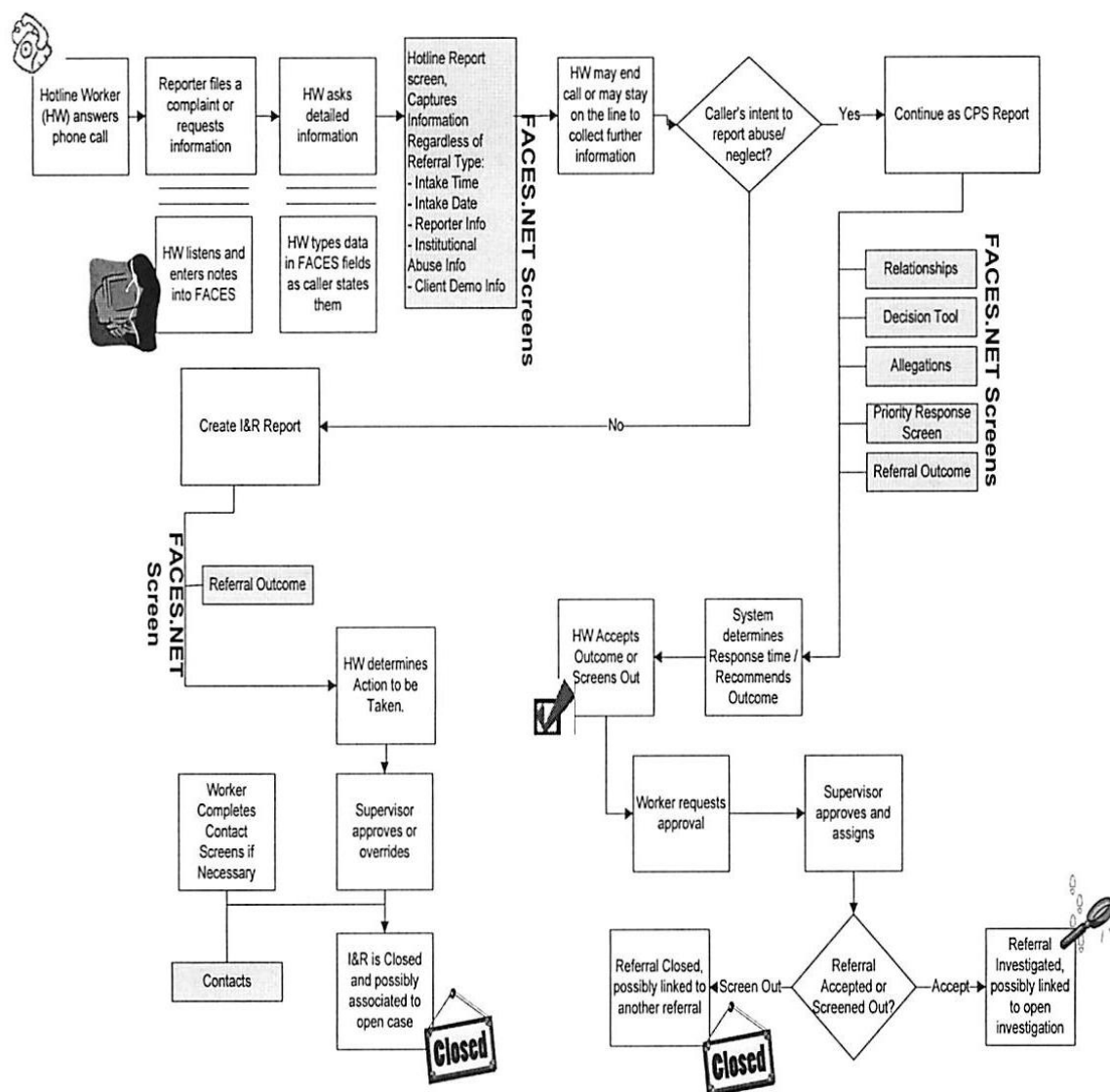
Table 6: Types of Abuse and Neglect that Warrant Either an Immediate or 24-hour Response

	Immediate Response	24-Hour Response
Abuse	<ul style="list-style-type: none"> • Death • Bone fractures or dislocations • Traumatic brain injury or skull fracture • Hemorrhaging • Suspicion of internal injuries • Wounds (open or deep) • Evidence of torture, binding, or confinement • Evidence or suspicion of a sexually transmitted disease • Evidence or suspicion of sexual penetration, exploitation, or molestation • Knowledge of sexual abuse perpetrator having access to the victim • Burning or scalding • Cuts, bruises, or welts • Shaken Baby Syndrome • Failure to protect (sexual and physical) • Sale or attempted sale of a child • Suspected drug ingestion • Hospital, physician, or police is currently holding the child • Other serious abuse allegations (depending upon the child vulnerability factors, the caretaker/family and child danger factors, the extent of the injury and the age of the child) 	<ul style="list-style-type: none"> • Substantial risk of physical injury • Caregiver failed to protect a child • Evidence of hitting, punching, biting
Neglect	<ul style="list-style-type: none"> • Left alone (dependent upon the age, developmental, emotional and physical needs of the child) • Uninhabitable conditions (e.g. family living in an abandoned building, inoperable utilities, exposed wiring, etc.) • Severe deprivation • Caretaker made plausible or credible threat to seriously harm the child • Failure to thrive • Malnutrition • Medical neglect or infants born with handicapping condition 	<ul style="list-style-type: none"> • Evidence of substance abuse • Boarder babies • Inadequate food, shelter, or clothing • Educational or medical neglect (including failure to obtain mental health services) • Domestic Violence • Emotional or mental deprivation • Caregiver is unwilling or unable to provide care

Source: CPS Hotline Policy, available at http://cfsa.dc.gov/CFSA/Publication%20Files/Policy%20Manual/Policies/Program_Hotline.pdf.

APPENDIX 3

FACES.NET Hotline Intake Process Flow



Information obtained from the FACES.NET Child Protective Services Manual (Summer 2009, version 3.1)

APPENDIX 4

CSSP Assessment Reports¹¹²

As part of its methodology, the team assessed CPS's compliance with benchmarks established by the Court-Appointed Monitor for *LaShawn*.¹¹³ In April 2009, CSSP issued a report entitled, "An Assessment of the District of Columbia's Child Welfare System (as of January 31, 2009)." The goal of this report was to determine CFSA's progress and compliance with AIP benchmarks. The AIP contains three sections: 1) Outcomes to be Achieved by December 31, 2008, to Ensure Child Safety, Permanency and Well-being, and System Accountability; 2) Outcomes to be Maintained; and 3) a 2007 Strategy Plan to Achieve Critical Safety, Permanence, and Well-being Outcomes.

CSSP reported that overall, CFSA had made numerous strides in improving its performance including clearing a backlog of investigations, filling frontline staff vacancies, hiring a Director, and improving morale. The agency had stabilized subsequent to the selection of an agency Director and morale had improved. However, on page 3, CSSP also reported:

There are many areas of practice where the District continues to fall far short of the standards required in the *LaShawn* Amended Implementation Plan (AIP). Additionally, as is documented in this report, there are multiple examples of inconsistent performance over time, suggesting that long-term sustainability of progress has not been achieved.

Tables 7 and 8 on the following pages summarize CPS's performance on AIP benchmarks as set forth in the CSSP's April 2009 report and comparative data from April 2008.

¹¹² Information contained in this appendix was obtained from the Court-Appointed Monitor's April 2009 report entitled, "An Assessment of The District of Columbia's Child Welfare System (As of January 31, 2009)" and the May 24, 2010 report titled, "An Assessment of the Quality of Child Abuse and Neglect Investigative Practices in the District of Columbia," See <http://cssp.org/uploadFiles/LaShawn%20Asmt%20of%20DC%20Child%20Welfare%20System%20013109.pdf> and <http://www.cssp.org/CPSInvestigativePracticesRpt.pdf> (last visited July 27, 2010).

¹¹³ CSSP assesses multiple aspects of CFSA operations and services. This ROI, however, addresses only CSSP's assessment of CPS operations and services.

APPENDICES

Table 7: Performance on *LaShawn* AIP Outcomes to be Achieved as of January 31, 2009¹¹⁴

Outcomes to be achieved AIP Requirement	April 2008 Performance	January 2009 Performance	Benchmark Achievement
1. <i>Investigations</i> a. Investigations of alleged child abuse and neglect shall be initiated within 48 hours. Initiation of an investigation includes seeing the child and talking with the child outside the presence of the caretaker. When children are not immediately located, documented good faith efforts to see the child within the first 48 hours shall include visiting the child's home, school, and day care in an attempt to locate the child as well as contacting the reporter, if known, to elicit additional information about the child's location; contacts with the police shall be made for all allegations that involve moderate and high risk cases.	56%	75%	No
b. Investigations of alleged child abuse and neglect shall be completed within 30 days.	17%	Of investigations opened in January 2009, 73% completed within 30 days. Of investigations closed in January 2009, 74% had been open 30 days or less.	No
c. Reports of abuse and neglect in foster homes and institutions shall be comprehensively investigated; i. Investigations in foster homes shall be completed within 30 days, and;	20%	Of investigations opened in January 2009, 100% completed within 30 days.	Yes

¹¹⁴ The information presented in Tables 7 and 8 is presented verbatim from pages 7 – 21 of CSSP's "An Assessment of the District of Columbia's Child Welfare System (as of January 31, 2009)." We omitted, however, some of the outcomes mentioned in CSSP's report.

APPENDICES

Outcomes to be achieved AIP Requirement	April 2008 Performance	January 2009 Performance	Benchmark Achievement
<p>ii. Investigations involving group homes, day care settings or other congregate care settings shall be completed within 60 days.</p>		<p>Of foster home investigations closed in January 2009, 100% had been open 30 days or less.</p> <p>Of group home, day care settings or other congregate care setting investigations closed in January, 100% had been open 60 days or less.</p>	
<p>2. <i>Acceptable Investigations</i> CFSA shall routinely conduct investigations of alleged child abuse and neglect. Evidence of acceptable investigations shall include:</p> <ul style="list-style-type: none"> a. Use of CFSA's screening tool in prioritizing response times for initiating investigations, and use of risk assessment protocol in making decisions resulting from an investigation; b. A full and systematic analysis of a family's situation and the factors placing a child at risk; c. Appropriate interviews with needed collateral contacts and with all children in the household outside the presence of the caretaker, parents or caregivers, or shall include documentation, by the worker, of good-faith efforts to see the child and that the worker has been unable to locate the child; and d. Medical and mental health evaluations of the children or parents when the worker determines that such evaluations are needed to complete the investigation. 	<p>No new data provided.</p>	<p>Measured through qualitative review; a qualitative review will be completed in summer 2009.^[115]</p>	<p><i>Unable to Determine pending Qualitative Review.</i></p>

¹¹⁵ On May 24, 2010, the Court-Appointed Monitor issued a report entitled, "An Assessment of the Quality of Child Abuse and Neglect Investigative Practices in the District of Columbia."

APPENDICES

Outcomes to be achieved AIP Requirement	April 2008 Performance	January 2009 Performance	Benchmark Achievement
28. <i>Caseloads</i> ¹¹⁶ The caseload of each worker conducting investigations of reports of abuse and/or neglect shall not exceed the MFO standard, which is 1:12 investigations.	63 of 85 (74%) workers and supervisors with more than 12 investigations (as of June 30, 2008)	7 of 58 (12%) workers with more than 12 investigations (as of March 31, 2009)	No

Table 8: Performance on *LaShawn* AIP Outcomes to be Maintained as of January 31, 2009

Outcomes to be maintained AIP Requirement	Status as of January 31, 2009	Outcome Maintained
1. <i>Entering reports into Computerized System.</i> CFSA shall immediately enter all reports of abuse or neglect into its computerized information systems and shall use the system to determine whether there have been prior reports of abuse or neglect in that family or to that child.	CFSA immediately enters all reports of abuse or neglect into FACES.	Yes
2. <i>Maintaining 24 Hour Response System</i> CFSA shall staff and maintain a 24-hour system for receiving and responding to reports of child abuse and neglect, which conforms to reasonable professional standards.	CFSA maintains a 24-hour Hotline in its Child Protective Services (CPS) Administration to receive reports of alleged child maltreatment.	Yes
3. <i>Checking for Prior Reports.</i> Child abuse and/or neglect reports shall show evidence that the investigator checked for prior reports of abuse and/or neglect.	FACES automatically performs a search for prior reports. ¹¹⁷	Yes

A subsequent report was issued on May 24, 2010, entitled “An Assessment of the Quality of Child Abuse and Neglect Investigative Practices in the District of Columbia.” The goal of this report was to examine the current status of intake and investigations practices and the extent to which those practices have improved over time. CSSP’s 2010 report contained 14 findings, which included 5 areas working well and 9 areas for improvement. CSSP reported that: 1) the hotline appropriately categorizes referrals as either priority level 1 or 2; 2) all children within

¹¹⁶ Caseloads data are for period ending January 9, 2009.

¹¹⁷ “The Monitor is concerned about inconsistent use of information about prior reports of abuse and/neglect involving child/family during the investigative process. In the next few months, the Monitor will conduct another in-depth review of the quality of investigative practice, in partnership with CFSA, to assess whether the problems raised many times in the past have been corrected and whether there are processes and supports in place to sustain any improvements detected.” [OIG note to reader: the results reported above were published in the CSSP’s May 24, 2010 report.]

APPENDICES

households, perpetrators, and reporting sources are interviewed; 3) collateral records are requested; 4) children receive health screens prior to placement; and 5) documentation of supervisory involvement is improving. Areas for improvement included:

- investigations are not initiated within required timeframes;
- collateral contacts were not consistently interviewed;
- the Child Advocacy Center¹¹⁸ is underutilized;
- information is not routinely gathered directly from medical and school personnel;
- families are not routinely connected to services;
- family team meetings are not routinely held;
- a high number of investigations exceed the 30-day timeframe;
- overall quality of investigations is uneven; and
- insufficient collaboration with other CFSA staff during in-house case transfers.¹¹⁹

In both “An Assessment of The District of Columbia’s Child Welfare System (As of January 31, 2009)” and “An Assessment of the Quality of Child Abuse and Neglect Investigative Practices in the District of Columbia,” CSSP concluded that CFSA and CPS made strides in obtaining outcomes. However, both reports indicate that areas for improvement remain.

¹¹⁸ The Child Advocacy Center conducts forensic interviews of children involved in sexual abuse.

¹¹⁹ CENTER FOR THE STUDY OF SOCIAL POLICY, AN ASSESSMENT OF THE QUALITY OF CHILD ABUSE AND NEGLECT INVESTIGATIVE PRACTICES IN THE DISTRICT OF COLUMBIA 43 (May 24, 2010).